


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 11, 2004 08:00 AM
Secretary of State

DOCUMENT # P18224
1. Entity Name
MICHELSON REALTY COMPANY



Principal Place of Business 7701 FORSYTH BLVD. SUITE 900 CLAYTON, MO 63105-8813	Mailing Address 7701 FORSYTH BLVD. SUITE 900 CLAYTON, MO 63105-8813
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04132004 No Chg-P CR2E034 (10/03)

4. FEI Number 43-0716882	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

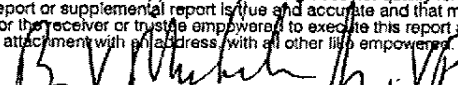
U00000159815
05/11/04-80004-005 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MICHELSON, BRUCE V. 7701 FORSYTH BLVD. CLAYTON, MO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LAZAROFF, ROBERT D. 7701 FORSYTH BLVD. ST. LOUIS, MO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV LAZAROFF, HAROLD 7701 FORSYTH BLVD. SAINT LOUIS, MO 63122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD MICHELSON, BRUCE V JR 7701 FORSYTH BLVD SAINT LOUIS, MO 63122
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC CASEY, MICHAEL E. 7701 FORSYTH BLVD. SAINT LOUIS, MO 63126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other live empowerment.

SIGNATURE:  **Bruce V. Michelson, Jr.** 4/13/04 314-862-7080

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #