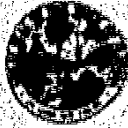


**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morsham  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

**DOCUMENT # F92000000211 (4)**

1. Corporation Name

**PIN OAK CAPITAL LTD., INC.**

95 MAY -1 AM 9:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**% STIFEL FINANCIAL CORP.  
500 N. BROADWAY  
ST LOUIS MO 63102**

**% STIFEL FINANCIAL CORP.  
500 N. BROADWAY  
ST LOUIS MO 63102**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/12/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

43-1617453

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

**DP  
SUMPTION, JAMES D  
500 N BROADWAY  
ST LOUIS MO 63102**

1.1 TITLE

Change  Addition

NAME

1.2 NAME

STREET ADDRESS

1.3 STREET ADDRESS

CITY - ST - ZIP

1.4 CITY - ST - ZIP

TITLE

**DS  
KNOTT, MARK D  
500 N BROADWAY  
ST LOUIS MO**

2.1 TITLE

Change  Addition

NAME

2.2 NAME

STREET ADDRESS

2.3 STREET ADDRESS

CITY - ST - ZIP

2.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

3.1 TITLE

Change  Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY - ST - ZIP

3.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

4.1 TITLE

Change  Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY - ST - ZIP

4.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

5.1 TITLE

Change  Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY - ST - ZIP

5.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

6.1 TITLE

Change  Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY - ST - ZIP

6.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

7.1 TITLE

Change  Addition

NAME

7.2 NAME

STREET ADDRESS

7.3 STREET ADDRESS

CITY - ST - ZIP

7.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

8.1 TITLE

Change  Addition

NAME

8.2 NAME

STREET ADDRESS

8.3 STREET ADDRESS

CITY - ST - ZIP

8.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

9.1 TITLE

Change  Addition

NAME

9.2 NAME

STREET ADDRESS

9.3 STREET ADDRESS

CITY - ST - ZIP

9.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

10.1 TITLE

Change  Addition

NAME

10.2 NAME

STREET ADDRESS

10.3 STREET ADDRESS

CITY - ST - ZIP

10.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

11.1 TITLE

Change  Addition

NAME

11.2 NAME

STREET ADDRESS

11.3 STREET ADDRESS

CITY - ST - ZIP

11.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

12.1 TITLE

Change  Addition

NAME

12.2 NAME

STREET ADDRESS

12.3 STREET ADDRESS

CITY - ST - ZIP

12.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

13.1 TITLE

Change  Addition

NAME

13.2 NAME

STREET ADDRESS

13.3 STREET ADDRESS

CITY - ST - ZIP

13.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

14.1 TITLE

Change  Addition

NAME

14.2 NAME

STREET ADDRESS

14.3 STREET ADDRESS

CITY - ST - ZIP

14.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

15.1 TITLE

Change  Addition

NAME

15.2 NAME

STREET ADDRESS

15.3 STREET ADDRESS

CITY - ST - ZIP

15.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

16.1 TITLE

Change  Addition

NAME

16.2 NAME

STREET ADDRESS

16.3 STREET ADDRESS

CITY - ST - ZIP

16.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

17.1 TITLE

Change  Addition

NAME

17.2 NAME

STREET ADDRESS

17.3 STREET ADDRESS

CITY - ST - ZIP

17.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

18.1 TITLE

Change  Addition

NAME

18.2 NAME

STREET ADDRESS

18.3 STREET ADDRESS

CITY - ST - ZIP

18.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

19.1 TITLE

Change  Addition

NAME

19.2 NAME

STREET ADDRESS

19.3 STREET ADDRESS

CITY - ST - ZIP

19.4 CITY - ST - ZIP

TITLE

**D  
TAYLOR, GREGORY F  
500 N BROADWAY  
ST LOUIS MO 63102**

20.1 TITLE

Change  Addition

NAME

20.2 NAME

STREET ADDRESS

20.3 STREET ADDRESS

CITY - ST - ZIP

20.4 CITY - ST - ZIP