

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000000833

**Entity Name:** CASCO DIVERSIFIED CORPORATION**Current Principal Place of Business:**10877 WATSON ROAD  
ST. LOUIS, MO 63127**Current Mailing Address:**10877 WATSON ROAD  
ST. LOUIS, MO 63127**FEI Number:** 43-1198532**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name TEGETHOFF, JAMES C  
Address 11021 CHATEAU CHURA  
City-State-Zip: ST. LOUIS MO 63128

Title VP  
Name HUBER, PAUL J  
Address 10840 POINTE DRIVE  
City-State-Zip: ST. LOUIS MO 63127

Title VP  
Name SHAW, RALPH R  
Address 14641 LOS PADRES COURT  
City-State-Zip: CHESTERFIELD MO 63017

Title VP  
Name GOVAIA, JAMES C  
Address 9832 EAGLE HILL LANE  
City-State-Zip: ST. LOUIS MO 63127

Title VP  
Name DOERING, PAUL  
Address 9018 MIDDLEWOOD COURT  
City-State-Zip: ST. LOUIS MO 63127

Title DIRECTOR  
Name MUSIAL, CARL R DIRECTOR  
Address #20 MORGAN LAKE LAND  
City-State-Zip: MILLSTADT IL 62260

Title PRESIDENT  
Name CUTTER, DANIEL E  
Address 1317 TRAILS DRIVE  
City-State-Zip: FENTON MO 63026

Title PRESIDENT  
Name CUTTER, DANIEL E  
Address 1317 TRAILS DRIVE  
City-State-Zip: FENTON MO 63026

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: PAUL R. DOERING****VICE PRESIDENT****02/06/2015**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            PRESIDENT  
Name           CUTTER, DANIEL E  
Address        1317 TRAILS DRIVE  
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