

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000005183

**Entity Name:** CHURCH ASSET MANAGEMENT, INC.

**Current Principal Place of Business:**

1500 WALL ST  
ST CHARLES, MO 63303

**Current Mailing Address:**

1500 WALL ST  
ST CHARLES, MO 63303

**FEI Number: 43-1428696**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
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 CEO  
Name JAMES, MARQ  
Address 1111 ASHWORTH RD  
City-State-Zip: W DES MOINES IA 50265

Title CHRM  
Name WALLACE, JAMES  
Address 1111 ASHWORTH RD  
City-State-Zip: W DES MOINES IA 50265

Title P  
Name STARNES, KERMIT  
Address 1111 ASHWORTH RD  
City-State-Zip: W DES MOINES IA 50265

Title SEC  
Name FARR, THOMAS C  
Address 1111 ASHWORTH ROAD  
City-State-Zip: WEST DES MOINE IA 50265

Title T  
Name JOOS, MARK  
Address 1111 ASHWORTH RD  
City-State-Zip: W DES MOINES IA 50265

Title ASSS  
Name WATERS, SAMUEL  
Address 1111 ASHWORTH RD  
City-State-Zip: W DES MOINES IA 50265

Title DIRECTOR  
Name BUCKLEY, SARAH  
Address 1111 ASHWORTH ROAD  
City-State-Zip: WEST DES MOINES IA 50265

Title DIRECTOR  
Name HUGHES, BRIAN  
Address 1111 ASHWORTH ROAD  
City-State-Zip: WEST DES MOINES IA 50265

**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: THOMAS C. FARR**

**SECRETARY**

**04/26/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            REDDIG, SCOTT  
Address        1111 ASHWORTH ROAD  
City-State-Zip: WEST DES MOINES IA 50265