## 2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000125

Entity Name: CASS INFORMATION SYSTEMS, INC.

**Current Principal Place of Business:** 

12444 POWERSCOURT DRIVE

SUITE 550

ST. LOUIS, MO 63131

**Current Mailing Address:** 

12444 POWERSCOURT DRIVE

SUITE 550

ST. LOUIS, MO 63131 US

FEI Number: 43-1265338 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Apr 14, 2023

**Secretary of State** 

5465913817CC

Officer/Director Detail:

Title CEO Title CFO

NORMILE, MICHAEL Name RESCH. MARTIN Name

Address 12444 POWERSCOURT DRIVE Address 12444 POWERSCOURT DRIVE

> SUITE 550 SUITE 550

ST. LOUIS MO 63131 ST. LOUIS MO 63131 City-State-Zip:

Title Title

EBEL, ROBERT A HOFFMAN, DOUGLAS J Name Name

12444 POWERSCOURT DRIVE 12444 POWERSCOURT DRIVE Address Address

SUITE 550 SUITE 550

ST. LOUIS MO 63131 ST. LOUIS MO 63131 City-State-Zip: City-State-Zip:

Title D Title D

SCHILLING, RANDALL L Name LINDEMANN, JAMES J Name

12444 POWERSCOURT DRIVE 12444 POWERSCOURT DRIVE Address Address

SUITE 550 SUITE 550

City-State-Zip: ST. LOUIS MO 63131 City-State-Zip: ST. LOUIS MO 63131

Title Title

Name ROTH, SALLY H Name WICKS, FRANKLIN D JR.

12444 POWERSCOURT DRIVE 12444 POWERSCOURT DRIVE Address Address

> SUITE 550 SUITE 550

ST. LOUIS MO 63131 City-State-Zip: ST. LOUIS MO 63131 City-State-Zip:

## 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: MATTHEW SCHUCKMAN

**EXECUTIVE GENERAL** COUNSEL & CORP **SECRETARY** 

04/14/2023

## Officer/Director Detail Continued:

Address

Title D Title DIRECTOR

Name EDWARDS, BENJAMIN F IV Name CLERMONT, RALPH W

Address 12444 POWERSCOURT DRIVE Address 12444 POWERSCOURT DRIVE

SUITE 550 SUITE 550

City-State-Zip: ST. LOUIS MO 63131 City-State-Zip: ST. LOUIS MO 63131

Title DIRECTOR Title SECRETARY

Name RUPP, JOSEPH D Name SCHUCKMAN, MATTHEW

12444 POWERSCOURT DRIVE Address 12444 POWERSCOURT DRIVE

SUITE 550 SUITE 550

City-State-Zip: ST. LOUIS MO 63131 City-State-Zip: ST. LOUIS MO 63131

Title DIRECTOR Title DIRECTOR

Name HENRY, WENDY J Name MARR, ANN

Address 12444 POWERSCOURT DRIVE Address 12444 POWERSCOURT DRIVE

SUITE 550 SUITE 550

City-State-Zip: ST. LOUIS MO 63131 City-State-Zip: ST. LOUIS MO 63131