

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000003623

**Entity Name:** ST. MARTIN'S PLACE MBS GP, INC.

**Current Principal Place of Business:**

720 OLIVE STREET, SUITE 2500  
ST.LOUIS, MO 63101

**Current Mailing Address:**

720 OLIVE STREET, SUITE 2500  
ST.LOUIS, MO 63101

**FEI Number:** 46-3476646

**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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           VP  
Name           MCCORMACK, KEVIN J  
Address        720 OLIVE STREET, SUITE 2500  
City-State-Zip: ST.LOUIS MO 63101

Title           DIRECTOR, VP  
Name           DUFFY, MICHAEL C  
Address        720 OLIVE STREET, SUITE 2500  
City-State-Zip: ST.LOUIS MO 63101

Title           PRESIDENT  
Name           BENNETT, VINCENT R  
Address        720 OLIVE STREET, SUITE 2500  
City-State-Zip: ST.LOUIS MO 63101

Title           DIRECTOR, VP, SECRETARY  
Name           ZIMMERMAN, HILLARY B  
Address        720 OLIVE STREET, SUITE 2500  
City-State-Zip: ST.LOUIS MO 63101

Title           DIRECTOR, VP, TREASURER  
Name           HARTMANN, KIM  
Address        720 OLIVE STREET, SUITE 2500  
City-State-Zip: ST.LOUIS MO 63101

*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:** HILLARY B. ZIMMERMAN

VP

04/04/2018

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

\_\_\_\_\_  
Date