

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 266206

FILED  
Mar 31, 2006  
Secretary of State

Entity Name: NORTH MAIN & FORSYTH ST CORP

**Current Principal Place of Business:**

1717 OLIVE STREET  
ST LOUIS, MO 63103

**New Principal Place of Business:**

**Current Mailing Address:**

1717 OLIVE STREET  
ST LOUIS, MO 63103

**New Mailing Address:**

FEI Number: 43-6067388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GROLLMAN, DOLORES MOSS  
Address: 11 OAKLEIGH LANE  
City-St-Zip: ST LOUIS, MO

Title: VPD ( ) Delete  
Name: PALMER, STANLEY,  
Address: 7456 YORK DR  
City-St-Zip: ST LOUIS, MO

Title: SD ( ) Delete  
Name: MOSS, JAMES  
Address: 1717 OLIVE STREET  
City-St-Zip: SAINT LOUIS, MO 63103

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STANLEY P. PALMER

VPD

03/31/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date