

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2003 8:00 am
Secretary of State

0652169 AT

05-09-2003 90146 032 ***150.00

DOCUMENT # 545369

1. Entity Name

SCOTT BROTHERS INVESTMENT CORP.



Principal Place of Business

1065 EXECUTIVE PARKWAY
SUITE 300
ST. LOUIS MO 63141
US

Mailing Address

1065 EXECUTIVE PARKWAY
SUITE 300
ST. LOUIS MO 63141
US

2. Principal Place of Business

100 Big River Dr.

3. Mailing Address

100 Big River Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lake St Louis mo

City & State

Lake St Louis mo

Zip

63367

Country

us

Zip

63367

Country

us

4. FEI Number

59-2094740

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

SCOTT, JOE H
300 LOCK ROAD
DEERFIELD BEACH FL 33441

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SCOTT, JOE
STREET ADDRESS 300 LOCK ROAD
CITY-ST-ZIP DEERFIELD BCH FL ☐ Delete

TITLE S
NAME SCOTT, EILEEN
STREET ADDRESS 18092 CHESTERFIELD ARPT
CITY-ST-ZIP CHESTERFIELD MO ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S
NAME Green, Debra J.
STREET ADDRESS 100 Big River Drive
CITY-ST-ZIP Lake St Louis Mo ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Debra J. Green
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-03 (636) 561-8013

CR2E034 (10/02)