


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91058 001 ***150.00

DOCUMENT # 824470	
1. Entity Name DEUTSCHE FINANCIAL SERVICES CORPORATION	

Principal Place of Business 655 MARYVILLE CENTRE DR ST. LOUIS MO 63141 US	Mailing Address 655 MARYVILLE CENTRE DR ST. LOUIS MO 63141 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 41-0954316	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE SVPS NAME GOLDMAN, RICHARD C. STREET ADDRESS 14711 KULKARNI COURT CITY-ST-ZIP CHESTERFIELD MO 63017 <input checked="" type="checkbox"/> Delete	TITLE CD NAME Chief Executive Officer STREET ADDRESS Daniel S. Henson CITY-ST-ZIP 10 Riverview Drive Danbury, CT 06810 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE PD NAME MARTIN, ROBERT M STREET ADDRESS 415 CONWAY PINE COURT CITY-ST-ZIP ST. LOUIS MO 63141 <input type="checkbox"/> Delete	TITLE P NAME President STREET ADDRESS 655 Maryville Centre Drive CITY-ST-ZIP St. Louis, MO 63141 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE AVP NAME GILLMANN, KURT STREET ADDRESS 4 GRELLNOR PL CITY-ST-ZIP MANCHESTER MO 63011 <input checked="" type="checkbox"/> Delete	TITLE TD NAME Treasurer STREET ADDRESS Matt Zakrzewski CITY-ST-ZIP 10 Riverview Drive Danbury, CT 06810 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE SVPA NAME CULP, STEVEN W STREET ADDRESS 715 FORSHEER COURT CITY-ST-ZIP CHESTERFIELD MO 63017 <input checked="" type="checkbox"/> Delete	TITLE SD NAME Secretary STREET ADDRESS Monica Gaudiosi CITY-ST-ZIP 10 Riverview Drive Danbury, CT 06810 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE EVP NAME GRATHWOHL, THOMAS J. STREET ADDRESS 410 MOUNT PARAN RD. CITY-ST-ZIP ATLANTA GA 30327 <input checked="" type="checkbox"/> Delete	TITLE SD NAME Attesting Secretary STREET ADDRESS Walter D. Bay CITY-ST-ZIP 655 Maryville Centre Drive St. Louis, MO 63141 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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:  **Walter D. Bay, Attesting Secretary (314) 523-3084**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)