FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 21 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 827475 (5)DAVID SHERMAN CORPORATION Principal Place of Business Mailing Address 5050 KEMPER 5050 KEMPER ST. LOUIS MO 63139 ST. LOUIS MO 63139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/14/1972 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 43-0736473 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Ζıρ Country 7ip 8. This corporation owes or has paid the current year Intangible Yes □ Ňo 24 26 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 DORAN, DON 3409 HOLLYHOCK WAY 2802 BUSCH BUYD Street Address (P.O. Box Number is Not Acceptable) TAMPA PL 33618 TAMAN FL 63 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE LUX, PAUL A 1.2 NAME CR2E034 NAME 706 SPOEDE ROAD STREET ADORESS 1.3 STREET ADDRESS ST LOUIS MO CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 21 TITLE TITLE LUX, DONN S NAME 2.2 NAME 34 HUNTLEIGH DOWNS STREET ADORESS 2.3 STREET ADDRESS ST. LOUIS MO CITY-ST-ZIP 2. 4 City-St-ZIP DELETE 3.1 TITLE Change Addition TITLE COLEMAN, SUSAN J 3.2 NAME NAME 12300 RONNIE LANE STREET ADDRESS 33 STREET ADDRESS ST LOUIS MO CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE SOUCY, STEPHEN P. NAME 4 2 NAME 2 MAPLELEAF LANE STREET ADDRESS 4.3 STREET ADDRESS BELLEVILLE IL CITY-ST-ZIP 4.4 City-St-ZiP DELETE 5.1 TITLE ☐ Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-S1-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME

14. Thereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or an attachment with an address.

6.3 STREET ADORESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Vice. Par shet 3/1/18

314-112-2624