

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 834857**

1. Entity Name

A.B. CHANCE COMPANY

Principal Place of Business

**210 NORTH ALLEN ST.
CENTRALIA MO 65240**

Mailing Address

**210 NORTH ALLEN ST.
CENTRALIA MO 65240**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **43-1047914**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	ROWELL, H.B	584 DERBY MILFORD RD	ORANGE CT 06177	<input type="checkbox"/>
VPC	ESTES, MICHAEL E	210 N. ALLEN ST.,	CENTRALIA MO	<input checked="" type="checkbox"/>
VPGM	BROWN, W M	210 N ALLEN ST	CENTRALIA MO 65240	<input type="checkbox"/>
VPO	STUMBAUGH, G.A.	210 N. ALLEN ST.	CENTRALIA MO	<input type="checkbox"/>
VPS	DAVIES, R.W.	584 DERBY MILFORD RD	ORANGE CT	<input type="checkbox"/>
VPT	BIGGART, J.H.	584 DERBY MILFORD RD	ORANGE CT	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
V.P. & Controller	DONALD W. McISAAC	210 N. ALLEN ST.	CENTRALIA, MO.	<input checked="" type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wesson M. Brown

Date

Daytime Phone #

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90255 006 ***150.00

DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)