## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Jan 29, 2005 08:00 AM **DOCUMENT # 835073 Secretary of State** 1. Entity Name JUSTINE REALTY COMPANY Principal Place of Business Mailing Address 10820 SUNSET OFFICE DRIVE 10820 SUNSET OFFICE DRIVE ST LOUIS MO 63127-1030 ST LOUIS MO 63127-1030 US 2. Principal Place of Business\_ 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State Applied For City & State 4. FEI Number 43-6036292 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 Synature, typed or printed name of registered agent and lide if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Change Addition HILE Delete THE U00000203554 MEYER, RHW MAM 01/29/05-80035-008 150.00 STREET ADDRESS 5653 N. HWY. 94 STREET ADDRESS PORTAGE DES'SIOUX MO 63373 CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE GALANIS, W T NAME NAME 6961 HILLSLAND AVE STREET ADDRESS STREET ADDRESS SAINT LOUIS MO 63109-1947 CHY-SI-ZIP CITY STAZIP Addition ☐ Defete MILE HILL NAME FIENUP, W. J. NAME STREET ADDRESS STREET ADDRESS 13045 WHEATFIELD FARM RD CHTY-ST-ZIP CITY-ST-ZIP SAINT LOUIS MO 63141 PTD Delete TITLE ☐ Change ☐ Addition HILL FIENUP, R. H. NAMI STREET ADDRESS 10820 SUNSET OFFICE DRIVE STE 240 STREET ADDRESS ST LOUIS MO 63127-1030 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition HILE THLE Delete SMYTHE, M.A. NAME NAME 17041 WILD HORSE CRK RD STREET AUDRESS STREET ADDRESS CHESTERFIELD MO 63005 CHY-ST-7P CITY-ST-ZIP Change Addition THE ☐ Delete DRE NAME NAME STREET ADDRESS STREET ADDRESS CITY STATIP CITY ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

FILED

SIGNATURE: Gaymond H. Fienus RAYMOND H. FIENUP 1-28.05 314.821.5866