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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 835699

1. Corporation Name EXECUTIVE REALTY COMPANY OF MISSOURI

Principal Place of Business 700 CORPORATE PARK DRIVE ST LOUIS MO 36105
Mailing Address ATTN: DIANNE HUBER 35 HUNTER AVE ST LOUIS MO 63124



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/31/1975
4. FEI Number 43-0905323
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 600 Corporate Park Dr.
2a. Mailing Address Suite, Apt. #, etc.
23. City & State St. Louis MO
24. Zip 63105 Country

9. Name and Address of Current Registered Agent SLAVIK, DENNIS W 3909 W. HILLSBOROUGH TAMPA FL 33614

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
84. City FL 85. 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 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE PD
NAME TAYLOR, JACK C.
STREET ADDRESS 201 SOUTH MCKNIGHT
CITY-ST-ZIP ST. LOUIS MO
TITLE S
NAME O'CONNELL, JOHN T
STREET ADDRESS 524 FOX RIDGE ROAD
CITY-ST-ZIP ST. LOUIS MO 63131
TITLE VTD
NAME TAYLOR, ANDREW C.
STREET ADDRESS 1147 LOG CABIN LANE
CITY-ST-ZIP ST. LOUIS MO
TITLE D
NAME DONALD L ROSS
STREET ADDRESS 49 MUIRFIELD
CITY-ST-ZIP ST LOUIS MO 63141

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] Secretary 2/3/99 314-512-2503
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)