

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843201

FILED
Mar 27, 2009
Secretary of State

Entity Name: ASCO SERVICES, INC.

Current Principal Place of Business:

50-60 HANOVER RD
STE 2112
FLORHAM PARK, NJ 07932 US

New Principal Place of Business:

Current Mailing Address:

50-60 HANOVER ROAD
FLORHAM PARK, NJ 07932

New Mailing Address:

FEI Number: 22-2243534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MOON, DAVID C
Address: 8000 W FLORISSANT AVENUE
City-St-Zip: SAINT LOUIS, MO 63136

Title: PD () Delete
Name: VISIOLI, ARMAND J
Address: 50-60 HANOVER ROAD
City-St-Zip: FLORHAM PARK, NJ

Title: TD () Delete
Name: ROWAN, EAMON
Address: 50-60 HANEVER RD
City-St-Zip: FLORHAM PARK, NJ 07932

Title: S () Delete
Name: WALSH, CHRISTOPHER G
Address: 50-60 HANOVER RD
City-St-Zip: FLORHAM PARK, NJ

Title: AT () Delete
Name: RABE, D.J.
Address: 8000 FLORISSANT AVE
City-St-Zip: SAINT LOUIS, MO 63141

Title: AS () Delete
Name: WESTMAN, TIMOTHY G
Address: 8000 W FLORISSANT AVENUE
City-St-Zip: SAINT LOUIS, MO 63136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER G WALSH

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03/27/2009

Electronic Signature of Signing Officer or Director

Date