

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854414

FILED  
Apr 15, 2010  
Secretary of State

Entity Name: CSI LEASING, INC.

**Current Principal Place of Business:**

9990 OLD OLIVE STREET ROAD  
SUITE 101  
SAINT LOUIS, MO 631415904 US

**New Principal Place of Business:**

**Current Mailing Address:**

9990 OLD OLIVE STREET ROAD  
SUITE 101  
SAINT LOUIS, MO 631415904 US

**New Mailing Address:**

FEI Number: 73-0982450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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: C  
Name: STEINBACK, KENNETH B  
Address: 189 REGATTA  
City-St-Zip: JUPITER, FL 33477

Title: CEO  
Name: GILLULA, E. WILLIAM  
Address: 2 OAK BEND DRIVE  
City-St-Zip: SAINT LOUIS, MO 63124

Title: PCOO  
Name: HAMILTON, STEPHEN G.  
Address: 3947 HOFFMAN ROAD  
City-St-Zip: WENTZVILLE, MO 63385

Title: S  
Name: CHERRICK, LORRAINE S  
Address: 47 BRIARCLIFF  
City-St-Zip: SAINT LOUIS, MO 63124

I hereby 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 all other like empowered.

SIGNATURE: LORRAINE S CHERRICK

S

04/15/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date