

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855921

Entity Name: ENCLOS CORP.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

2770 BLUE WATER RD.
EAGAN, MN 55121

New Principal Place of Business:

Current Mailing Address:

10733 SUNSET OFFICE DR
200
ST LOUIS, MO 63127

New Mailing Address:

FEI Number: 41-1300221 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: P () Delete
Name: SAGE, GREGG
Address: 10733 SUNSET OFFICE DR - STE 200
City-St-Zip: ST LOUIS, MO 63127

Title: ST () Delete
Name: COLEMAN, DAVID P
Address: 10733 SUNSET OFFICE DR., #200
City-St-Zip: SAINT LOUIS, MO 63127

Title: V () Delete
Name: KELLEY, EDMUND J
Address: 2770 BLUE WATER RD.
City-St-Zip: SAINT PAUL, MN 55121

Title: D () Delete
Name: SAGE, GREGG C
Address: 10733 SUNSET OFFICE DR., #200
City-St-Zip: SAINT LOUIS, MO 63127

Title: S () Delete
Name: COLE, KEVIN
Address: 2770 BLUE WATER RD
City-St-Zip: EAGAN, MN 55121

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
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: DAVID COLEMAN

ST

02/24/2009

Electronic Signature of Signing Officer or Director

_____ Date