

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2004 08:00 AM
Secretary of State

DOCUMENT # F00000004685

Entity Name

PRCO NATIONAL CONSTRUCTION COMPANY, INC.



Principal Place of Business

1750 SOUTH BRENTWOOD BLVD.
ST. LOUIS, MO 63144

Mailing Address

1750 SOUTH BRENTWOOD BLVD.
ST. LOUIS, MO 63144



01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-1886711

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
ARNOLDY, RICHARD R
1750 SOUTH BRENTWOOD BLVD., SUITE 701
ST. LOUIS, MO 63144

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCOO
COOK, JEFFREY L
1750 SOUTH BRENTWOOD BLVD., SUITE 701
ST. LOUIS, MO 63144

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
HOLSTE, STEPHEN F
1750 SOUTH BRENTWOOD BLVD., SUITE 701
ST. LOUIS, MO 63144

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BRIDELL, CRAIG A
1750 SOUTH BRENTWOOD BLVD., SUITE 701
ST. LOUIS, MO 63144

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
LEWIN, THOMAS G
101 SOUTH HANLEY, SUITE 1600
ST. LOUIS, MO 63105

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000012455
01/26/04-80011-001 150.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/04
Date

314-963-0712
Daytime Phone #