2008 FOR PROFIT CORPORATION

Jan 14, 2008 8:00 am **Secretary of State** ANNUAL REPORT 01-14-2008 90110 024 ***150.00 DOCUMENT # F00000006706 1. Entity Name STERN BROTHERS & CO. 40000000 Principal Place of Business Mailing Address 8000 MARYLAND AVE. 8000 MARYLAND AVE. STE 800 STE 800 ST LOUIS, MO 63105 ST LOUIS, MO 63105 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072008 CR2E034 (12/06) Cha-P 4 FELNumber Applied For City & State City & State 43-1357568 Not Applicable Country Zip Country \$8.75 Additional Zíp 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NIX, H. GILMER Street Address (P.O. Box Number is Not Acceptable) 5010 BAYSHORE BLVD., STE 1 TAMPA, FL 33611 Zip Code FL 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, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. ☐ Addition CD ☐ Delete TITLE Change TITLE ESTELL, DONALD A NAME. NAME 801 S MERAMEC STREET ADDRESS STREET ADDRESS CLAYTON, MO 63105 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE 11TLE FINN, TERRENCE NAME NAME STREET ADDRESS 28 RIDGEMOOR STREET ADDRESS CLAYTON, MO 63105 CITY-ST-ZIP CITY-ST-ZIP TREASURER CFO Delete Addition TITLE BILE aga ☐ Change MIRIANI, JASON A NAME NAME 6124 MISTY MEADOW DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HOUSE SPRINGS, MO 63051 Change ☐ Addition TITLE TITLE Delete STERN, WILLIAM M NAME NAME STREET ADDRESS 3 HACIENDA STREET ADDRESS SAINT LOUIS, MO 63124 CITY-ST-ZIP CITY-ST-ZIP Defete III E Change ☐ Addition TITLE NAME FINN, PEGGY NAME

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

STREET ADDRESS

999

v. P.

Change

☐ Addition

CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME STREET ADDRESS

SIGNATURE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

28 RIDGE MOOR

SAINT LOUIS, MO 63105

BOLLMAN, PEGGY L

11264 LIANA LANE SAINT ANN, MO 63074