

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004021

FILED
Apr 28, 2004
Secretary of State

Entity Name: KORET OF CALIFORNIA, INC

Current Principal Place of Business:

505 14TH STREET
OAKLAND, CA 94612

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14080
ST. LOUIS, MO 63178

New Mailing Address:

FEI Number: 94-1687671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CD () Delete
Name: UPBIN, HAL J
Address: 600 KELLWOOD PARKWAY
City-St-Zip: CHESTERFIELD, MO 63017

Title: VCD () Delete
Name: GRANOFF, MARTIN J
Address: 475 PARK AVE S 9TH FL
City-St-Zip: NEW YORK, NY 10016

Title: PCEO () Delete
Name: SMEYNE, FRED
Address: 505 14TH STREET
City-St-Zip: OAKLAND, CA 94612

Title: VD () Delete
Name: CAPPS, W. LEE III
Address: 600 KELLWOOD PARKWAY
City-St-Zip: CHESTERFIELD, MO 63017

Title: VP () Delete
Name: KENNISON, BRADLEY
Address: 505 14TH STREET
City-St-Zip: OAKLAND, CA 94612

Title: T () Delete
Name: WHITLEY, SCOTT C
Address: 600 KELLWOOD PARKWAY
City-St-Zip: CHESTERFIELD, MO 63017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PCEO (X) Change () Addition
Name: BROOKS, HAROLD S
Address: 505 14TH STREET
City-St-Zip: OAKLAND, CA 94612

Title: VPD (X) Change () Addition
Name: POLLIHAN, THOMAS H
Address: 600 KELLWOOD PARKWAY
City-St-Zip: CHESTERFIELD, MO 63017

Title: VPD (X) Change () Addition
Name: CAPPS, W. LEE III
Address: 600 KELLWOOD PARKWAY
City-St-Zip: CHESTERFIELD, MO 63017

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 for the exemption stated in Section 119.07(3)(i), 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: SCOTT C WHITLEY

T

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date