


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90192 001 ***150.00

DOCUMENT # F04000000743

1. Entity Name
 EL-O-MATIC USA, INC.



40079450

Principal Place of Business
 9009 KING PALM DR
 TAMPA, FL 33619

Mailing Address
 9009 KING PALM DR
 TAMPA, FL 33619

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 8000 W. Florissant Ave.
 Suite, Apt. #, etc.
 Sta. 2586



04282006 Chg-P CR2E034 (11/05)

City & State
 City & State
 St. Louis, MO

Zip Country
 Zip Country
 63136 USA

4. FEI Number
 22-2385145

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

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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, 2006 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	D BUTTON, DAN G 8100 W FLORISSANT ST LOUIS, MO 63136 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUZBEE, T.D. 205 SOUTH CENTER ST MARSHALLTOWN, LA <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SHAW, R.V. 8100 W FLORISSANT ST LOUIS, MO 63136 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT BURNETT, TERESA A 8100 W FLORISSANT ST LOUIS, MO 63136 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPF GAFFNEY, JOHN 9009 KING PALM DR TAMPA, FL 33619 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GEEKIE, MATTHEW W 8100 W FLORISSANT ST LOUIS, MO 63136 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Plum, David M. 9009 King Palm Dr. Tampa, FL 33619 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Buzbee, T.D. 205 S. Center Street Marshalltown, IA 50158 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P.-North American Sales Chandler, George 9009 King Palm Dr. Tampa, FL 33619 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Schoch, Alex C. 8100 W. Florissant Ave. St. Louis, MO 63136 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Secretary Sperino, John A. 9009 King Palm Dr. Tampa, FL 33619 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: T.A. Burnett **T.A. Burnett** **Asst. Treasurer** **4/28/06** **314-553-1818**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT

40079450
F0400000793

Ronald L. Bednar
Director
Income Tax Compliance

8000 West Florissant Avenue
P.O. Box 4100
St. Louis, MO 63136-8506

T (314) 553 2058
F (314) 553 1235
ron.bednar@emrsn.com

May 1, 2006

Florida Dept. of State
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

Dear Sir or Madam:

Please find enclosed our 2006 Florida Annual Report for EI-O-Matic USA, Inc. Also enclosed is our check in the amount of \$150.00, payment in full of the filing fee due.

It is our understanding that the ship date of May 1 is accepted as the filing date and that no late fee will be assessed.

We trust you will find the enclosed in order.

Sincerely,

A handwritten signature in cursive script that reads 'R. L. Bednar / slk'.

R.L. Bednar

RLB:slk

Enclosures