2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000780

Entity Name: CHARLES L. CRANE AGENCY COMPANY

FILED Jan 31, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	H FOURTH 8 , MO 63102	STREET, STE. 800				
Current Mailing Address:			New Maili	New Mailing Address:		
	H FOURTH 8 , MO 63102	STREET, STE. 800				
FEI Number:	43-1394059	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status De	sired ()
Name and	Address of	Current Registered Agent:	Name and	Address of No	ew Registered Ager	ıt:
515 E. PAF		TE RESEARCH, LTD., INC. 301 US				
	named entity of Florida.	submits this statement for the	purpose of changing i	ts registered of	fice or registered age	nt, or both,
SIGNATUF	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
Election Can	npaign Financi	ng Trust Fund Contribution ().				
OFFICERS	S AND DIRE	CTORS:	ADDITION	IS/CHANGES 1	TO OFFICERS AND	DIRECTORS:
Title: Name: Address: City-St-Zip:	P (REEDY, MICH 504 SHERWO SAINT LOUIS	OOD DR	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DS (BENOIST, W. 41 PICARDY ST. LOUIS, M	LANE	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	C (IMBS, R CHR 19 FORDYCE SAINT LOUIS	LN	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	BERRA, THO 14006 BOXFO		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	T (PURCELL, W 3 SOUTHMOO SAINT LOUIS	PR DR.	Title: Name: Address: City-St-Zip:	T (X) PURCELL, WILL 7228 WESTMOR SAINT LOUIS, M	RELAND	
Title: Name: Address: City-St-Zip:	SVP (BOSCHERT, I 1867 CAMBE ST. LOUIS, M	RLY RD.	Title: Name: Address: City-St-Zip:	() (Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: W ELLIOT BENOIST DS 01/31/2007