

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005028

FILED  
Apr 10, 2012  
Secretary of State

Entity Name: THOMAS J. WHITE COMPANY

**Current Principal Place of Business:**

1600 SO. BRENTWOOD BLVD.  
SUITE 770  
ST. LOUIS, MO 63144

**New Principal Place of Business:**

**Current Mailing Address:**

1600 SO. BRENTWOOD BLVD.  
SUITE 770  
ST. LOUIS, MO 63144

**New Mailing Address:**

FEI Number: 43-1586561

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WHITE, THOMAS J  
1555 ST. LUCIE WEST BLVD.  
SUITE 103  
PORT ST. LUCIE, FL 34986 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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: WHITE, THOMAS J  
Address: 1600 SO. BRENTWOOD BLVD. - SUITE 770  
City-St-Zip: ST. LOUIS, MO 63144

Title: S  
Name: FERRICK, JAMES H  
Address: 1600 SO. BRENTWOOD BLVD. - SUITE 770  
City-St-Zip: ST. LOUIS, MO 63144

Title: D  
Name: SCHENK, PATTY  
Address: 1717 FIDDIE CREEK RD.  
City-St-Zip: LABADIE, MO 63055

Title: D  
Name: MEALY, GARY  
Address: 481 SW WHITMORE DR.  
City-St-Zip: PORT ST. LUCIE, FL 34984

I hereby 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 all other like empowered.

SIGNATURE: THOMAS J. WHITE

CP

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date