


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90469 026 ***150.00

DOCUMENT # F06000007917 1. Entity Name FIRST ADVISORS, INC.					
Principal Place of Business 15455 CONWAY RD CHESTERFIELD, MO 63017			Mailing Address 15455 CONWAY RD CHESTERFIELD, MO 63017		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-4187012	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP JUNKINS, CRAIG A 15455 CONWAY RD CHESTERFIELD, MO 63017	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S RODERMUND, ROBIN 15455 CONWAY RD CHESTERFIELD, MO 63017	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT DOZA, JANICE 15455 CONWAY RD CHESTERFIELD, MO 63017	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Janice Doza <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCCO HAEDIKE, CHRISTY 15455 CONWAY RD CHESTERFIELD, MO 63017	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Christy Haedike <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Please see attached <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete		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: <u>Christine Haedike</u> <u>Christine Haedike</u> <u>4/26/07</u> <u>630-537-1040 x183</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT

First Advisors, Inc.

60045201
Florida
Document # F0600007917

List of Officers

Name: Craig A. Junkins **Title:** CEO/President
Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Robin Rodermund **Title:** Secretary
Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Janice Doza **Title:** Treasurer
Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Christy Haedike **Title:** Chief Compliance
Officer
Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

List of Directors Please add the following Directors:

Name: Adam Antoniades **Title:** Director
Bus. Addr.: 655 W. Broadway, 11th Floor, San Diego, CA 92101

Name: Craig A. Junkins **Title:** Director
Bus. Addr.: 15455 Conway Rd., Chesterfield, MO 63017

Name: Joel E. Marks **Title:** Director
Bus. Addr.: 199 St. Nicolas Circle, Atlanta, GA 30327

Name: Dwight Badger **Title:** Director
Bus. Addr.: 311 S. Wacker Drive, Suite 1650, Chicago, IL 60606