2003 FOR PROFIT CORPORATION

UN	003 F NEFOR	M BUSINE	T CORPOR SS REPOR 0003823	ATION T (UBR		FILEI Apr 21, 2003 Secretary o	8:00 am f State	
1. Entity Nan		ADVISERS, INC.				04-21-2003 90534 05	0 ***150.00	
Principal Place of Business 00 \$ 4TH \$T SUITE 1000 ST. LOUIS MO 63102 IS 2. Principal Place of Business 700 MARNET \$T			Mailing Address 400 S 4TH ST SUITE 1000 ST. LOUIS MO 63102 US 3. Mailing Address 700 MARKET 57					
Suite, Apt. #, etc. PTTN: COMPLIANCE City & State			City & State			4. FE! Number 43-1619559 Applied For		
51. C	ars,	Country	ST LOVIS, N	0 63/0 Country VSA	21	43-1618558 5. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Street A	Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324			. •	City	FL Zip Code			
	e named entity tions of registe		the purpose of changing its	registered office o	r registere	ed agent, or both, in the State of Florida. I am	familiar with, and accept	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					ture required t	DATE 9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
0.		OFFICERS AND I	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND		
itle Ame Treet Address Ity-St-Zip	D EICHNER, I 61 FAIR 01 SAINT LOU	rico.) Celete	NAME STREET ADDRESS CITY-ST-ZIP	VIE.	MAN R. LAZARUS E PADSIANIS - COMPUINI 3 COPPER LAXOS BLUD OUDUO, MD 63040		
ITLE Ame Treet address ITY-ST-ZIP	RICHARD J 14049 POR CHETERFIE	EST_CREST	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	11/0	VILL PLUS. MARKA 16 W. MARKHAM 7 STACKER PINES COL 2 NOOD, NO 630/1	NAT.	
ITLE AME TREET ADDRESS ITY-ST-ZIP	VPGS MCCAULEY 6309 PERS	, MATTHEW P	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	32E	OUDOD, NO 63011 PROSENTA, SERTIMAN, GONORO NIS CAPRIBLIONE PRAKUDOD NO 6312 FF FINANCIAL OFFICER	•	
ITLE AME TREET ADORESS ITY-ST-ZIP	V. WULLER, D 1729-8HILO CHESTERFI		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	485	F FINANCIAL OFFICER BUT POTORSON -E US HIGHWAY 1. 50VA ZIN, N.J. 08830	☐ Change	
	AT KOEGER, J 9217 WEME ST LOUIS 1	BLEY WOODS	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition	
TLE Ame Treet address ITY-ST-ZIP	WULLER, D 1729 SHILO CHESTERFI	ONLE OH RIDGE JELD MO 63005	— S∧ m <u>&</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICA	S PABSIDONT	Change] Addition	
2. I hereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or clirector of the corporation or the receiver or truetee empowered to execute this report as required by Chapter 607, Fiorida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with maddless with all other like empowered. 3/4-4444-								
SIGNATURE: SIGNATURE AND TYPET/OR PRINTED TABLE OF SIGNING OFFICER OR DIRECTOR 1/6/2003 06/4 Date Desputing Printe Print								

SIGNATURE: