FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000006029 (1)**

1. Corporation Name

THE MCCLURE GROUP INC.

Principal Place of Business

1 CORPORATE WOODS DR
BRIDGETON MO 63044

Mailing Address

1 CORPORATE WOODS DR
BRIDGETON MO 63044

3. Date Incorporated or Qualified: **12/11/1995**

3a. Date of Last Report:

4. FEI Number: **43-1723272** [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip 24 County 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 County 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Date

12. OFFICERS AND DIRECTORS

TITLE	CCEO	[ ] DELETE
NAME	MCCLURE, THOMAS R	
STREET ADDRESS	1220 VALLEY FORGE RD., BLDG #34, BOX 911	
CITY-ST-ZIP	VALLEY FORGE PA 19482	
TITLE	P	[ ] DELETE
NAME	ROWE, J P	
STREET ADDRESS	1220 VALLEY FORGE RD., BLDG #34, BOX 911	
CITY-ST-ZIP	VALLEY FORGE PA 19482	
TITLE	VCFO	[ ] DELETE
NAME	MUSTILLI, JOSEPH M	
STREET ADDRESS	1220 VALLEY FORGE RD., BLDG #34, BOX 911	
CITY-ST-ZIP	VALLEY FORGE PA 19482	
TITLE	ST	[ ] DELETE
NAME	MCCLURE, CYNTHIA A	
STREET ADDRESS	1220 VALLEY FORGE RD., BLDG #34, BOX 911	
CITY-ST-ZIP	VALLEY FORGE PA 19482	
TITLE	VS	[ ] DELETE
NAME	MIDDEKE, PAUL W	
STREET ADDRESS	1 CORPORATE WOODS DR	
CITY-ST-ZIP	BRIDGETON MO 63044	
TITLE	S	[ ] DELETE
NAME	MYERS, CAROL J	
STREET ADDRESS	9140 LAWN AVE.	
CITY-ST-ZIP	ST. LOUIS MO 63144	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		[ ] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		[ ] Change [ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		[ ] Change [ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an X in this box.

SIGNATURE: Cynthia A. McClure 4/15/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (12/95)