

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001151

FILED  
Mar 21, 2005  
Secretary of State

Entity Name: ASTARIS, LLC

**Current Principal Place of Business:**

622 EMERSON RD., SUITE 500  
ST LOUIS, MO 63141

**New Principal Place of Business:**

**Current Mailing Address:**

622 EMERSON RD., SUITE 500  
ST LOUIS, MO 63141

**New Mailing Address:**

FEI Number: 43-1858847

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: WILSON, MICHAEL  
Address: 1735 MARKET STREET  
City-St-Zip: PHILADELPHIA, PA 19103

Title: MGR ( ) Delete  
Name: FOSTER, KIM  
Address: 1735 MARKET STREET  
City-St-Zip: PHILADELPHIA, PA 19103

Title: MGR ( ) Delete  
Name: WEIDHAS, CHARLES  
Address: 575 MARYVILLE CENTRE DRIVE  
City-St-Zip: SAINT LOUIS, MO 63141

Title: MGR ( ) Delete  
Name: CROWLEY, JERRY  
Address: 575 MARYVILLE CENTRE DRIVE  
City-St-Zip: SAINT LOUIS, MO 63141

Title: MGR ( ) Delete  
Name: SULLIVAN, JAMES  
Address: 575 MARYVILLE CENTRE DRIVE  
City-St-Zip: SAINT LOUIS, MO 63141

Title: MGR ( ) Delete  
Name: SMITH, MIKE  
Address: 1735 MARKET STREET  
City-St-Zip: PHILADELPHIA, PA 19103

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: NEHLS, LYLES  
Address: 1735 MARKET STREET  
City-St-Zip: PHILADELPHIA, PA 19103

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JERRY CROWLEY

MGR

03/21/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date