2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

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SIGNATURE:

Mar 10, 2005 8:00 am **Secretary of State** DOCUMENT # P09293 03-10-2005 90158 002 ***150.00 Entity Name CLARK G.I.C., INC. Principal Place of Business Mailing Address 8235 FORSTYH BLVD 8235 FORSTYH BLVD 5002444R STE 400 STE 400 ST. LOUIS, MO 63105 ST. LOUIS. MO 63105 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02252005 Chg-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 43-1294749 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 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 ... Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required whon reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS ☐ Delete TITLE TITLE HUGHES, CHRISTINE BURNS, KARON NAME NAME 8235 FORSYTH BLVD 8235 FORSTYTH BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLAYTON, MO 63105 CITY-ST-ZIP CLAYTON MO TITLE DC ☐ Defete TITLE ☐ Change Addition NAME NOVELLY, P. A. NAME STREET ADDRESS 8235 FORSY,TH BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLAYTON, MO 63105 ☐ Change ☐ Addition --- □ Delete JIT! F TITLE HANK, JOHN L JR. NAME NAME 8235 FORSYTH BLVD. STREET ADDRESS STREET ADDRESS CLAYTON, MO 63105 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE LYNCH, LAURANCE J NAME NAME STREET ADDRESS 8235 FORSYTH BLVD STREET ADDRESS CLAYTON, MO 63105 CITY-ST-ZIP C!TY-ST-ZIP ☐ Change Addition ☐ Delete TITLE INGRAM, JOSEPH H NAME NAME STREET ADDRESS 8235 FORSYTH BLVD STREET ADDRESS CITY-ST-7IP SAINT LOUIS, MO 63105 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE CALL, JEFFERY NAME NAME ---8235 FORSYTH BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SAINT LOUIS, MÖ 63105 12. I hereby certify that the information supplied with this filling does not quality 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 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

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