FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 APR 26 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P17631 (3)

1. Corporation Name
M & E INSTALLERS, INC.

Principal Place of Business	Mailing Address
9301 OLIVE BLVD. ST. LOUIS MO 63132	9301 OLIVE BLVD. ST. LOUIS MO 63132

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/12/1988
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
County — 25 / 30

4. FEI Number: 43-1262683 ☐ 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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☐ Change ☐ Addition
NAME	MAFFRAND, RONALD J.	1.2 NAME		
STREET ADDRESS	902 PINE ST.	1.3 STREET ADDRESS		
CITY-ST-ZIP	ST. CHARLES MO	1.4 CITY-ST-ZIP		
TITLE	VD	2.1 TITLE	VDAS	☒ Change ☐ Addition
NAME	O'NEILL, STEPHEN J.	2.2 NAME	O'BRIEN, ROSE M.	
STREET ADDRESS	1521 MALLARD POINTE CT.	2.3 STREET ADDRESS	7372 NORTHMOOR	
CITY-ST-ZIP	CHESTERFIELD MO	2.4 CITY-ST-ZIP	ST LOUIS, MO 63105	
TITLE	SD	3.1 TITLE		☐ Change ☐ Addition
NAME	GIBBONS, MICHELE	3.2 NAME		
STREET ADDRESS	30 DEL RAY CT.	3.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERS MO	3.4 CITY-ST-ZIP		
TITLE	VTD	4.1 TITLE		☒ Change ☐ Addition
NAME	MICHAELS, WILLIAM R.	4.2 NAME	DELETED	
STREET ADDRESS	2062 KEHRSBORO DR.	4.3 STREET ADDRESS		
CITY-ST-ZIP	CHESTERFIELD MO	4.4 CITY-ST-ZIP		
TITLE	VSD	5.1 TITLE		☒ Change ☐ Addition
NAME	TILTON, MICHAEL J.	5.2 NAME	DELETED	
STREET ADDRESS	1823 O'CONNELL POINTE CT	5.3 STREET ADDRESS		
CITY-ST-ZIP	MANCHESTER MO	5.4 CITY-ST-ZIP		
TITLE	VAS	6.1 TITLE		☒ Change ☐ Addition
NAME	SHARP, JAMES A	6.2 NAME	DELETED	
STREET ADDRESS	1311 TOPSIDER C T.	6.3 STREET ADDRESS		
CITY-ST-ZIP	FLORISSANT MO	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 receivor 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 address.

SIGNATURE: Ronald J. Maffrand RONALD J. MAFFRAND 4/19/95 (314) 995-2246
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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FEIN 43-1262683
19-Apr-95

M & E INSTALLERS, INC.
Officers/Directors Addendum
For Year Ending April 1995

Common Stock:	
Outstanding	$1,000
Authorized	1000
Par Value	$ 100

Corporate Officers/Directors:

NAME/ADDRESS	SOC. SEC. #	OFFICE	DIRECTOR	TERM
Ronald J. Maffrand 902 Pine Street St. Charles, MO 63301	489-62-1095	President Treasurer	Yes	*
Michele Gibbons 30 Del Ray Court St. Peters, MO 63376	487-58-4351	Secretary	Yes	*
Rose M. O'Brien 7372 Northmoor St. Louis, MO 63105	327-60-5398	V.P. Asst. Secretary	Yes	*

*All Officers/Directors are elected for a term of one year, ending April 1995.
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