

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19166

FILED
Jan 05, 2007
Secretary of State

Entity Name: KASCO SERVICES CORPORATION

Current Principal Place of Business:

1569 TOWER GROVE AVE.,
ST. LOUIS, MO 63110

New Principal Place of Business:

Current Mailing Address:

300 PRIMERA BLVD
STE 432
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 13-3341885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TURNER, BRIAN E.
Address: 1850 KEHRSWOOD DRIVE
City-St-Zip: CHESTERFIELD, MO 63005

Title: VPSD () Delete
Name: SMITH, LARRY D
Address: 191 VARSITY CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: ATAS () Delete
Name: ORELUP, THOMAS R
Address: 433 WINDING OAKS COURT
City-St-Zip: BALLWIN, MO 63021

Title: AT (X) Delete
Name: GAYS, CHRISTOPHER A
Address: 3011 E. WASHINGTON ST
City-St-Zip: ORLANDO, FL 32803

Title: VP () Delete
Name: MAINGOT, LARRY C
Address: 1060 VISTA ROAD
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: FICHTHORN, LUKE E.,
Address: 2453 ALAQUA DR
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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City-St-Zip:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE C. MAINGOT

VP

01/05/2007

Electronic Signature of Signing Officer or Director

_____ Date