

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90119 002 ***150.00

DOCUMENT # P24726 ✓

1. Corporation Name

LANDMARK CONTRACT MANAGEMENT, INC.

Principal Place of Business

Mailing Address

930 Roosevelt Pkwy.
Ste 200
Chesterfield, MO 63017-2053

Same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/13/1989

4. FEI Number

41-1588629

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 16020 Swingley Ridge Road

26 16020 Swingley Ridge Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 200

27 Suite 200

City & State

City & State

23 Chesterfield, MO

28 Chesterfield, MO

Zip

Country

Zip

Country

24 63017-6030 25 St. Louis

29 63017-6030 30 St. Louis

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CEO P T ☐ DELETE
NAME HORNBERG, BRADLEY H.
STREET ADDRESS 632 LEGENDS VIEW DRIVE
CITY-ST-ZIP EUREKA, MO 63025

1.1 TITLE V ☐ Change ☒ Addition
1.2 NAME DANIEL B. STEUBER
1.3 STREET ADDRESS 202 ROBIN HILL LANE
1.4 CITY-ST-ZIP BALLWIN, MO 63021

TITLE V S ☐ DELETE
NAME DIANE E. MCGINNIS
STREET ADDRESS 5 PITTSFIELD COURT
CITY-ST-ZIP CHESTERFIELD, MO 63017

2.1 TITLE V ☐ Change ☒ Addition
2.2 NAME RANDEE D. BACH
2.3 STREET ADDRESS 191 SUNNYWOOD COURT
2.4 CITY-ST-ZIP ST. LOUIS, MO 63146

TITLE V ☒ DELETE
NAME BARRY R. SMITH
STREET ADDRESS 2312 CONESTOGA TRAIL CT
CITY-ST-ZIP GLENCOE, MO 63038

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE P ☒ DELETE
NAME D. LYNN WHITT
STREET ADDRESS 125 ROEHAMPTON LANE
CITY-ST-ZIP ST. CHARLES, MO 63304

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 address, with all other like empowered.

SIGNATURE:

Diane E. McGinnis

Diane E. McGinnis

3/1/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)