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May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P35497 (7)
1. Corporation Name
FIRST FINANCIAL BUILDING CORPORATION

Principal Place of Business Mailing Address
13537 BARRETT PARKWAY DRIVE, SUITE 215 13537 BARRETT PARKWAY DRIVE, SUITE 215
MANCHESTER MO 63021-5866 MANCHESTER MO 63021-5866



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

3. Date Incorporated or Qualified 3a. Date of Last Report
09/16/1991 05/01/1996
4. FEI Number Applied For
36-3729610 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing \$5.00 May Be
Trust Fund Contribution ☐ 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 10. Name and Address of New Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301
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 CD ☐ DELETE 1.1 TITLE ☐ Change ☐ Addition
NAME GOLITZ, JOHN T. 1.2 NAME
STREET ADDRESS 415 WEST GOLF ROAD, #19 1.3 STREET ADDRESS
CITY-ST-ZIP ARLINGTON HEIGHTS IL 1.4 CITY-ST-ZIP
TITLE PD ☐ DELETE 2.1 TITLE ☐ Change ☐ Addition
NAME DUNLAP, REX H. 2.2 NAME
STREET ADDRESS 13537 BARRETT PARKWAY DR 2.3 STREET ADDRESS
CITY-ST-ZIP MANCHESTER MO 2.4 CITY-ST-ZIP
TITLE SD ☐ DELETE 3.1 TITLE ☐ Change ☐ Addition
NAME UNGASHICK, JOHN M. 3.2 NAME
STREET ADDRESS 415 WEST GOLF ROAD, #19 3.3 STREET ADDRESS
CITY-ST-ZIP ARLINGTON HEIGHTS IL 3.4 CITY-ST-ZIP
TITLE TD ☐ DELETE 4.1 TITLE ☐ Change ☐ Addition
NAME ZAEGEL, CHARLES J. 4.2 NAME
STREET ADDRESS 13537 BARRETT PARKWAY DR 4.3 STREET ADDRESS
CITY-ST-ZIP MANCHESTER MO 4.4 CITY-ST-ZIP
TITLE VD ☐ DELETE 5.1 TITLE ☐ Change ☐ Addition
NAME KREISHMAN, JOHN A. 5.2 NAME
STREET ADDRESS 13537 BARRETT PKWY DR 5.3 STREET ADDRESS
CITY-ST-ZIP MANCHESTER MO 5.4 CITY-ST-ZIP
TITLE V ☒ DELETE 6.1 TITLE ☐ Change ☒ Addition
NAME KUNKEL, DONALD M. 6.2 NAME
STREET ADDRESS ONE UNIVAC LANE 6.3 STREET ADDRESS
CITY-ST-ZIP WINDSOR CT 6.4 CITY-ST-ZIP
V A. DAVID ROBICHAUX
13537 BARRETT PARKWAY DR
MANCHESTER MO 63021

14. I do 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.

SIGNATURE: Charles J. Zaegel, Treasurer 4/18/97 314-821-2265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/96)