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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P36656

(7)

CLAYTON SECURITIES SERVICES, INC.

FILED Jan 20 1998 8:00am Secretary of State



Principal Plac	Mailing Address	g Address			
112 SOUTH H	HANLEY RD.	112 SOUTH HANLEY RD.			
STE. 102		STE. 102			
CLAYTON MO 63105		CLAYTON MO 63105			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 12/05/1991
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			43-1495112 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			SQ 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	try	This corporation owes or has paid the current year Intangible
24	25	29	30	•	Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren		1		10. Name and Address of New Registered Agent
BEI	RNSTEIN, RICHARD S.		8	1 Nam	
	SW 56TH TERRACE		-		
	ANTATION FL 33317		8	Stree	et Address (P.O. Box Number is Not Acceptable)
	***************************************		1	13	
				<u> </u>	
			8	4 City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.050	2 and 607 1509. Florida Clabut	or the she	L name	od corporation submits this statement for the purpose of all a size is a size of all as in a size of a size of all as in a size of a siz
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 till it applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	geni signar	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	ST	DELETE	1.1 1011	:	Change Addition
NAME	BURCH, STEPHEN K.		1.2 NAM		Contained Audition
STREET ADDRESS	7411 STRATFORD AVE				
	ST. LOUIS MO			ET ADDRESS	0.5
CITY-ST-ZIP TITLE	P	DELETE	1.4 CITY		
	DIEMER, MARK E.	L., often	2.1 717(8		Change Addition C
NAME Oroset aboves	3726 JUNIATA		2.2 NAM		
STREET ADDRESS	ST. LOUIS MO		•	ET ADDRESS	95
CITY-ST-ZIP	OI. LOUIS MO	Doctor	2 4 CITY		
TITLE		☐ DELETE	3 1 TITLE		☐ Change ☐ Addilion
NAME			3 2 NAM		
STREET ADDRESS			3.3 STRE	et address	s
CITY-ST-ZIP			3.4. CITY		
TITLE		☐ DELETE	4.1 TOTLE		Change Addition
NAME			4. 2 NAV	E	
STREET ADDRESS			4.3 STRE	ET ADDRESS	s
CITY-ST-ZIP			4.4 CITY	- \$1 - ZIP	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAMI		
STREET ADDRESS			53 STRE	ET ADDRESS	s
CITY-ST-ZIP			5.4 CITY-	·ST · ZIP	
TITLE		DELETE	6.1 1IILE		Change Addition
NAME			6.2 NAM		
STREET ADDRESS				: E1 ADDRESS	s
CITY-ST-ZIP			6.4 CITY		

4. 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 certify that I am an officer or director of the corporation or the receiver or trusted 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 all an auticument with an address.