

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90548 049 ***150.00

DOCUMENT # P36849

1. Entity Name
EDJ HOLDING COMPANY, INC.



Principal Place of Business
**201 PROGRESS PKWY.
MARYLAND HEIGHTS, MO 63043**

Mailing Address
**12555 MANCHESTER RD
TAX DEPT
ST LOUIS, MO 63131**

200504134



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03222005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

43-1449982

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SO. PINE ISLAND RD.
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DCP ☐ Delete
NAME HILL, DOUGLAS E
STREET ADDRESS 12555 MANCHESTER RD.
CITY-ST-ZIP SAINT LOUIS, MO 63131

TITLE VP ☒ Delete
NAME POPE, DARRYL L.
STREET ADDRESS 201 PROGRESS PKWY.
CITY-ST-ZIP MARYLAND HEIGHTS, MO

TITLE S ☐ Delete
NAME SOBOL, LAWRENCE R.
STREET ADDRESS 201 PROGRESS PKWY.
CITY-ST-ZIP MARYLAND HEIGHTS, MO

TITLE T ☐ Delete
NAME STEVEN NOVIK
STREET ADDRESS 201 PROGRESS PKWY.
CITY-ST-ZIP MARYLAND HEIGHTS, MO

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STEVE NOVIK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

314-515-4974