

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004625

Entity Name: CHARLES L. CRANE AGENCY COMPANY**Current Principal Place of Business:**400 CHESTERFIELD CENTER
SUITE 100
CHESTERFIELD, MO 63017**Current Mailing Address:**400 CHESTERFIELD CENTER
SUITE 100
CHESTERFIELD, MO 63017 US**FEI Number:** 43-1394059**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301 US*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**Officer/Director Detail :**

Title	SECRETARY
Name	REEDY , MIKE JR.
Address	400 CHESTERFIELD CENTER SUITE 100
City-State-Zip:	CHESTERFIELD MO 63017

Title	TREASURER
Name	REEDY , SCOTT
Address	400 CHESTERFIELD CENTER SUITE 100
City-State-Zip:	CHESTERFIELD MO 63017

Title	VP
Name	WELLS , TIMOTHY
Address	400 CHESTERFIELD CENTER SUITE 100
City-State-Zip:	CHESTERFIELD MO 63017

Title	PRESIDENT
Name	BERRA , TOM JR.
Address	400 CHESTERFIELD CENTER SUITE 100
City-State-Zip:	CHESTERFIELD MO 63017

Title	DIRECTOR
Name	O'BRIEN , MIKE
Address	400 CHESTERFIELD CENTER SUITE 100
City-State-Zip:	CHESTERFIELD MO 63017

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL T. REEDY JR.**AUTHORIZED PERSON****04/20/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date