

1.) CORPORATION NAME:

**McCORMACK BARON RAGAN MANAGEMENT SERVICES, INC.**

DUE DATE: **3/31/2011**

SCC ID NO: **F0571309**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI C T CORPORATION SYSTEM 4701 COX ROAD, SUITE 301 GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|-------|------------|
| COMA  | 30,000     |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**MO**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 720 OLIVE STREET, SUITE 2500

CITY/ST/ZIP: ST. LOUIS, MO 63101-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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| <p>NAME: ALAN J RAGAN<br/>TITLE: PRESIDENT<br/>ADDRESS: 720 OLIVE STREET, SUITE 2500<br/>CITY/ST/ZIP/CO: ST LOUIS, MO 63101-</p>                   | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| <p>NAME: RICHARD D. BARON<br/>TITLE: DIRECTOR<br/>ADDRESS: 720 OLIVE STREET, SUITE 2500<br/>CITY/ST/ZIP/CO: ST LOUIS, MO 63101-</p>                | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| <p>NAME: HILLARY B. ZIMMERMAN<br/>TITLE: VP &amp; SECRETARY<br/>ADDRESS: 720 OLIVE STREET, SUITE 2500<br/>CITY/ST/ZIP/CO: ST. LOUIS, MO 63101-</p> | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| <p>NAME: BARBARA A. FREELAND<br/>TITLE: DIRECTOR<br/>ADDRESS: 720 OLIVE STREET, SUITE 2500<br/>CITY/ST/ZIP/CO: ST LOUIS, MO 63101-</p>             | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| <p>NAME: KEVIN J. MCCORMACK<br/>TITLE: VICE PRESIDENT<br/>ADDRESS: 720 OLIVE STREET, SUITE 2500<br/>CITY/ST/ZIP/CO: ST. LOUIS, MO 63101-</p>       | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |

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| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | POLLY KINSLOWE<br>DIRECTOR<br>720 OLIVE STREET, SUITE 2500<br>ST. LOUIS, MO 63101-                | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | VINCENT R. BENNETT<br>DIRECTOR<br>720 OLIVE STREET, SUITE 2500<br>ST. LOUIS, MO 63101-            | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | TONY M. SALAZAR<br>DIRECTOR<br>801 SOUTH GRAND AVENUE, SUITE 780<br>LOS ANGELES, CA 90017-        | <input type="checkbox"/> OFFICER            | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | LINDA E. HEINEY<br>VP & CFO<br>720 OLIVE STREET, SUITE 2500<br>ST LOUIS, MO 63101-                | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | AARON N. SWAIN<br>VICE PRESIDENT<br>720 OLIVE STREET, SUITE 2500<br>ST. LOUIS, MO 63101-          | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | J. THOMSON DOBBIN<br>VICE PRESIDENT<br>720 OLIVE STREET, SUITE 2500<br>ST. LOUIS, MO 63101-       | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | CLAUDIA BRODIE<br>VICE PRESIDENT<br>720 OLIVE STREET, SUITE 2500<br>ST. LOUIS, MO 63101-          | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | LINDA VEREGIN<br>VICE PRESIDENT<br>720 OLIVE STREET, SUITE 2500<br>ST. LOUIS, MO 63101-           | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | LISA BEFFA<br>VICE PRESIDENT<br>720 OLIVE STREET, SUITE 2500<br>ST. LOUIS, MO 63101-              | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | MICHAEL MARTINEZ<br>VICE PRESIDENT<br>801 SOUTH GRAND AVENUE, SUITE 780<br>LOS ANGELES, CA 90017- | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |

OFFICER       DIRECTOR

NAME: ROBYN WILHITE  
TITLE: VICE PRESIDENT  
ADDRESS: 720 OLIVE STREET, SUITE 2500  
CITY/ST/ZIP/CO: ST. LOUIS, MO 63101-

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

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| <u>/s/ HILLARY B. ZIMMERMAN</u>                     | <u>HILLARY B. ZIMMERMAN, VP &amp;</u>                | <u>3/28/2011</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | <u>SECRETARY</u><br>PRINTED NAME AND CORPORATE TITLE | DATE             |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.