

1.) CORPORATION NAME:

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

DUE DATE: **3/31/2014**

SCC ID NO: **F0571309**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**C T CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

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.

NAME:	TIMOTHY J. ZALESKI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	720 OLIVE STREET, SUITE 2500		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63101		

NAME:	KEVIN J. MCCORMACK	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	720 OLIVE STREET, SUITE 2500		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63101		

NAME:	HILLARY B. ZIMMERMAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP & SECRETARY		
ADDRESS:	720 OLIVE STREET, SUITE 2500		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63101		

NAME:	LISA BEFFA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	720 OLIVE STREET, SUITE 2500		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63101		

NAME:	KIM HARTMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & CFO		
ADDRESS:	720 OLIVE STREET, SUITE 2500		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63101		

NAME:	MICHAEL MARTINEZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	801 SOUTH GRAND AVENUE, SUITE 780		
CITY/ST/ZIP/CO:	LOS ANGELES, CA 90017		

NAME: DAVID MAUROFF TITLE: VICE PRESIDENT ADDRESS: 401 ROSE STREET CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: AARON N. SWAIN TITLE: VICE PRESIDENT ADDRESS: 720 OLIVE STREET, SUITE 2500 CITY/ST/ZIP/CO: ST. LOUIS, MO 63101	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: ROBYN WILHITE TITLE: VICE PRESIDENT ADDRESS: 720 OLIVE STREET, SUITE 2500 CITY/ST/ZIP/CO: ST. LOUIS, MO 63101	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: VINCENT R. BENNETT TITLE: DIRECTOR ADDRESS: 720 OLIVE STREET, SUITE 2500 CITY/ST/ZIP/CO: ST. LOUIS, MO 63101	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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.	
/s/ HILLARY B. ZIMMERMAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	HILLARY B. ZIMMERMAN, VP & SECRETARY PRINTED NAME AND CORPORATE TITLE
3/31/2014 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.	