

1.) CORPORATION NAME:

TRANS ADVANTAGE, INC.

DUE DATE: **4/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1788779**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 PREMIER DR

CITY/ST/ZIP: FENTON, MO 63026

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.

<p>NAME: MARK J DZIERGOWSKI TITLE: PRESIDENT ADDRESS: 1 PREMIER DR CITY/ST/ZIP/CO: FENTON, MO 63026</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: PETER J. AMANN TITLE: ASST TREASURER ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: JACK M. DAHLIA TITLE: ASST TREASURER ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: MARK N. SCHROEDER TITLE: TREASURER ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: JAN ROBEY ALONZO TITLE: SECRETARY ADDRESS: 1 PREMIER DR CITY/ST/ZIP/CO: FENTON, MO 63026</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: TIMOTHY M. BAER TITLE: ASST SECRETARY ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR

NAME: RICHARD H. MCCLURE TITLE: CEO ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: VALERIE J PACER TITLE: ASST SECRETARY ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: THOMAS E. ANDRESEN, JR. TITLE: DIRECTOR ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: STEVEN A. HERMAN TITLE: DIRECTOR ADDRESS: ONE PREMIER DRIVE CITY/ST/ZIP/CO: FENTON, MO 63026	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: Ralph W. Pregler TITLE: ASST TREASURER ADDRESS: One Premier Drive CITY/ST/ZIP/CO: Fenton, MO 63026	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: Robert M. Hughes TITLE: DIRECTOR ADDRESS: One Premier Drive CITY/ST/ZIP/CO: Fenton, MO 63026	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: Richard K. Smith, Jr. TITLE: DIRECTOR ADDRESS: One Premier Drive CITY/ST/ZIP/CO: Fenton, MO 63026	<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/ VALERIE J PACER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VALERIE J PACER, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	3/26/2014 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.				