

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006019

Entity Name: BURK-KLEINPETER, INC.

FILED
Mar 31, 2011
Secretary of State

Current Principal Place of Business:

4176 CANAL STREET
NEW ORLEAS, LA 70119

New Principal Place of Business:

Current Mailing Address:

4176 CANAL STREET
NEW ORLEAS, LA 70119

New Mailing Address:

FEI Number: 72-1175112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CB
Name: BURK, WILLIAM R III
Address: 4176 CANAL STREET
City-St-Zip: NEW ORLEANS, LA 70119

Title: PRES
Name: KLEINPETER, GEORGE C
Address: 4176 CANAL STREET
City-St-Zip: NEW ORLEANS, LA 70119

Title: EVP
Name: ARMBRUSTER, JAMES W
Address: 4176 CANAL STREET
City-St-Zip: NEW ORLEANS, LA 70119

Title: EVP
Name: JACKSON, MICHAEL L
Address: 4176 CANAL STREET
City-St-Zip: NEW ORLEANS, LA 70119

Title: EVP
Name: BADON, BRUCE L
Address: 4176 CANAL STREET
City-St-Zip: NEW ORLEANS, LA 70119

Title: EVP
Name: GIARDINA, J.W. JR.
Address: 4176 CANAL STREET
City-St-Zip: NEW ORLEANS, LA 70119

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: JAMES W. ARMBRUSTER

EVP

03/31/2011

Electronic Signature of Signing Officer or Director

Date