

Jason Kander Secretary of State
2016-2017 BIENNIAL REGISTRATION REPORT

BUSINESS

K00002544
Date Filed: 10/31/2016
Jason Kander
Missouri Secretary of State

Exhibit No. 227
Date 11-28-2017 Reporter Stewart
File No. WR-2017-0259

FILED
December 7, 2017
Data Center
Missouri Public
Service Commission

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

* SECTION 1, 3 & 4 ARE REQUIRED

REPORT DUE BY: 9/30/2016

K00002544
AMERICAN BANK OF MISSOURI

690 NORTH SERVICE ROAD WEST
PO BOX 490
WRIGHT CITY MO 63390

RENEWAL MONTH: JUNE	
<input type="checkbox"/> I OPT TO CHANGE THE CORPORATION'S RENEWAL MONTH TO FOR A \$25.00 FEE	
PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: *	
690 NORTH SERVICE RD WEST (Required)	
STREET	
WRIGHT CITY MO	63390
CITY / STATE	ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent _____
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address _____

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS		BOARD OF DIRECTORS *	
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST PRESIDENT AND SECRETARY BELOW		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST ONE DIRECTOR BELOW	
<u>PRESIDENT</u>	NASH, TIMOTHY C 27046 SERENITY TRAIL STREET WARRENTON MO 63383 CITY/STATE/ZIP	<u>NAME</u>	GLARNER, ROBERT B JR 5 CRESTWOOD DR STREET CLAYTON MO 63105 CITY/STATE/ZIP
<u>SECRETARY</u>	SPRINGMEYER, MELISSA C 126 TURKEY RUN CT STREET WRIGHT CITY MO 63390 CITY/STATE/ZIP	<u>NAME</u>	NASH, TIMOTHY C 27046 SERENITY TRAIL STREET WARRENTON MO 63383 CITY/STATE/ZIP
		<u>NAME</u>	GLARNER, P DAVID 27 CRESTWOOD STREET CLAYTON MO 63105 CITY/STATE/ZIP
		<u>NAME</u>	GLARNER, PAUL 123 SOUTH GORE STREET ST LOUIS MO 63119 CITY/STATE/ZIP

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 576.060 RSMo. Photocopy or stamped signature not acceptable. *

Authorized party or officer sign here Melissa Springmeyer (Required)

Please print name and title of signer: Melissa Springmeyer / Secretary
NAME TITLE

REGISTRATION REPORT FEE IS:
 ___\$40.00 If filed on or before 9/30/2016
 ___\$55.00 If filed on or before 10/31/2016
 ___\$70.00 If filed on or before 11/30/2016
 ___\$85.00 If filed on or before 12/31/2016
 ADD AN ADDITIONAL \$25.00 FEE IF CHANGING THE RENEWAL MONTH.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): mspringmeyer@myamericanbank.net

Jason Kander Secretary of State
 2016-2017 BIENNIAL REGISTRATION REPORT
 BUSINESS

K00002544
 AMERICAN BANK OF MISSOURI
 #####
 690 NORTH SERVICE ROAD WEST
 PO BOX 490
 WRIGHT CITY MO 63390

	OFFICERS (Continued) NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE).	BOARD OF DIRECTORS (Continued) NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE).
3	STREET CITY/STATE/ZIP	<u>DIR.</u> STREET CITY/STATE/ZIP BUCK, ROBERT 1360 CARRIAGE CROSSING CHESTERFIELD MO 63005