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Annual Report
Filed 5-1-95

2 pgs.

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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Norheim
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 819486

(2)

1. Corporation Name

PET MILK COMPANY

**APPROVED
AND
FILED**

95 MAY -1 PM 3:39

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

C/O TAX DEPARTMENT, 400 S. 4TH ST.
P.O. BOX 392
ST LOUIS MO 63166

Mailing Address

C/O TAX DEPARTMENT, 400 S. 4TH ST.
P.O. BOX 392
ST LOUIS MO 63166

DO NOT WRITE IN THIS SPACE.

3. Is it incorporated or qualified
04/06/1966

3a. Date of Last Report
05/01/1994

4. FET Number
43-0839128

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip

24. Country

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office
or registered agent, or both, in this State. I, Sandra B. Norheim, Secretary of State, hereby accept the appointment as registered agent. I am
familiar with the law of this State and I am qualified to accept this appointment.

SIGNATURE

(Signature of Registered Agent)

(Signature of Secretary of State)

(Signature of Registered Agent)

12. OFFICERS AND DIRECTORS

NAME	SD
NAME	VOGT, PHYLLIS P.
STREET ADDRESS	200 WEST WHITE
CITY & STATE	MILLSTADT, IL 60000
NAME	PD
NAME	MITTELBUSHER, RICHARD L.
STREET ADDRESS	1151 WESTMOOR PLACE
CITY & STATE	TOWN & COUNTRY, MO 0
NAME	TDV
NAME	KNIZEL, ANTHONY
STREET ADDRESS	1220 TAKARA CT.
CITY & STATE	ST LOUIS, MO 0
NAME	ATD
NAME	WESLEY, PATRICK G
STREET ADDRESS	4704 BENNING
CITY & STATE	GRANITE CITY, IL 0
NAME	V
NAME	SHEETS, MYRON
STREET ADDRESS	84 N.7 GREEN DR.
CITY & STATE	ST CHARLES, MO 0

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition

14. I, Sandra B. Norheim, Secretary of State, hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that I am qualified to accept this appointment. I am familiar with the law of this State and I am qualified to accept this appointment.

SIGNATURE:

David R. Wegner

**David R. Wegner
Vice President**

APR 27 1995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR