

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **854356** (3)

1. Corporation Name
EAGLE SNACKS, INC.



Principal Place of Business

Mailing Address

ATTN: CORPORATE TAX DEPT.
ONE BUSCH PLACE
ST. LOUIS MO 63118

ATTN: CORPORATE TAX DEPT.
ONE BUSCH PLACE
ST. LOUIS MO 63118

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

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

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

10/12/1982

3a. Date of Last Report

05/01/1995

4. FEI Number

43-1246129

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. 191.032, Florida Statutes

Yes No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0402 and 607.1509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person authorized to file this report

Signature of Registered Agent (if not the same as above)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

FILE	<input type="checkbox"/> DELETE
NAME	V
STREET ADDRESS	OPDYKE, WILLIAM H. ONE BUSCH PLACE ST LOUIS MO
CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE
NAME	T
STREET ADDRESS	THAYER, GERALD C. ONE BUSCH PLACE ST LOUIS MO
CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE
NAME	S
STREET ADDRESS	REEVES, LAURA H. ONE BUSCH PLACE ST LOUIS MO
CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE
NAME	CEO
STREET ADDRESS	LEAVENWORTH, DAVID S. ONE BUSCH PLACE ST LOUIS MO
CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE
NAME	PD
STREET ADDRESS	BOWLER, KEVIN F ONE BUSCH PLACE ST LOUIS MO
CITY-STATE-ZIP	
FILE	<input type="checkbox"/> DELETE
NAME	V
STREET ADDRESS	ISELIN JR., JOHN W ONE BUSCH PLACE ST LOUIS MO
CITY-STATE-ZIP	

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

Schedule Attached

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Laura Reeves

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/96

314-577-2359

DAY

DATE PHONE #

CR2E034 (12/95)

EAGLE SNACKS, INC.

(Business Address: 231 S. Bemiston Avenue, Suite 600, St. Louis, MO 63105)

OFFICERS

David A. Poldoian	President
Wendell J. Waye	Executive Vice President & Chief Financial Officer
Dale E. Ditmars	Vice President - Operations
Phillip P. Abbadessa	Vice President - International and Airline Sales
Stephen J. Galluzzo	Vice President - Quality Assurance & Technical Services
Daniel R. Keller	Vice President - Sales
David L. Jacobson	Vice President - Human Resources
James R. Sebo	Vice President - Marketing
William J. Kimmins	Treasurer
Laura H. Reeves	Secretary
Albert R. Wunderlich	Tax Controller
George S. Thomas	Assistant Secretary
Richard N. Hill	Assistant Treasurer
John D. Castagno	Assistant Tax Controller

DIRECTORS

August A. Busch III
Dale E. Ditmars
John W. Iselin, Jr.
Daniel R. Keller
Donald W. Kloth
Aloys H. Litteken
William H. Opdyke
David A. Poldoian
John H. Purnell
Kenn A. Reynolds
Gerald C. Thayer
Wendell J. Waye
Vacancy

Effective 12/8/95