

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90082 001 *2,850.00

66286



DO NOT WRITE IN THIS SPACE

DOCUMENT # 854356

1. Entity Name
EAGLE SNACKS, INC.

Principal Place of Business 231 S BEMISTON AVE STE 600 CLAYTON MO 63105 US	Mailing Address ATTN: CORPORATE TAX DEPT. ONE BUSCH PLACE ST. LOUIS MO 63118
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number **43-1246129** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POLDOIAN, DAVID A ONE BUSCH PLACE SAINT LOUIS MO 63118 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT KIMMINS, WILLIAM J JR. ONE BUSCH PLACE SAINT LOUIS MO 63118 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REEVES, LAURA H. ONE BUSCH PLACE ST LOUIS MO <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATC CASTAGNO, JOHN D ONE BUSCH PLACE SAINT LOUIS MO 63118 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SAUERHOFF, DAVID C ONE BUSCH PLACE SAINT LOUIS MO 63118 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KRUGER, FREDERICK B ONE BUSCH PLACE SAINT LOUIS MO 63118 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCHEDULE ATTACHED <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TC CASTAGNO, JOHN D ONE BUSCH PLACE ST LOUIS MO 63118 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **John D. Castagno, Tax Controller** **3/20/01** **314/577-7996**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

DOC #854356

Officers and Directors

66286

Eagle Snacks, Inc.

Principal Place of Business: 231 South Bemiston Avenue
Suite 600
Clayton, MO 63105

Mailing Address:: One Busch Place
St. Louis, MO 63118

Officer

David A. Poldoian	President
Laura H. Reeves	Secretary
Frederick B. Kruger	Assistant Secretary
William J. Kimmins Jr.	Vice President and Treasurer
David C. Sauerhoff	Assistant Treasurer
John D. Castagno	Tax Controller

Title

Director

Martin D. Cargas	Director
David A. Poldoian	Director

Title