


**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 27, 2003 8:00 am**  
**Secretary of State**

01-27-2003 90505 001 \*2,700.00

**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**

33003000



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent  
**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

4. FEI Number **43-1246129**  
Applied For  
 Not Applicable

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POLDOIAN, DAVID A ONE BUSCH PLACE SAINT LOUIS MO 63118 <input checked="" 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	TC CASTAGNO, JOHN D ONE BUSCH PLACE SAINT LOUIS MO 63118 <input 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 checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D KRUGER, FREDERICK B ONE BUSCH PLACE ST LOUIS MO 63118 <input type="checkbox"/> Change <input checked="" 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	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	D CARGAS, MARTIN D ONE BUSCH PLACE ST LOUIS MO 63118 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. **JOHN D CASTAGNO**

SIGNATURE: **SIGNATURE REQUIRED** TAX CONTROLLER **1/15/03** 314/577-7996  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

Officers and Directors

Attachment  
35603035  
#854356

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

Frederick B. Kruger  
Laura H. Reeves  
William J. Kimmins Jr.  
David C. Sauerhoff  
John D. Castagno

Title

President  
Secretary  
Vice President and Treasurer  
Assistant Treasurer  
Tax Controller

Director

Martin D. Cargas  
Frederick B. Kruger

Title

Director  
Director