

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90047 001 *2,700.00

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DOCUMENT # F95000001694					
1. Entity Name ANHEUSER-BUSCH WHOLESALER DEVELOPMENT CORPORATION III					
Principal Place of Business ONE BUSCH PL. ST. LOUIS, MO 63118			Mailing Address CORPORATE TAX DEPT. ONE BUSCH PLACE ST. LOUIS, MO 63118 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 43-1599263	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOFFMEISTER, JAMES F		NAME	SANDISON, BRUCE M	
STREET ADDRESS	ONE BUSCH PL.		STREET ADDRESS	ONE BUSCH PLACE	
CITY-ST-ZIP	ST. LOUIS, MO 63118		CITY-ST-ZIP	ST LOUIS MO 63118	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANDISON, BRUCE M		NAME		
STREET ADDRESS	ONE BUSCH PL.		STREET ADDRESS		
CITY-ST-ZIP	ST. LOUIS, MO 63118		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REEVES, LAURA H		NAME		
STREET ADDRESS	ONE BUSCH PL.		STREET ADDRESS		
CITY-ST-ZIP	ST. LOUIS, MO 63118		CITY-ST-ZIP		
TITLE	AS	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOLEY, LISA A		NAME		
STREET ADDRESS	ONE BUSCH PL.		STREET ADDRESS		
CITY-ST-ZIP	ST. LOUIS, MO 63118		CITY-ST-ZIP		
TITLE	VT	<input type="checkbox"/> Delete	TITLE	V/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHORT, ANTHONY J		NAME	SHORT, ANTHONY J	
STREET ADDRESS	ONE BUSCH PL.		STREET ADDRESS	ONE BUSCH PLACE	
CITY-ST-ZIP	ST. LOUIS, MO 63118		CITY-ST-ZIP	ST LOUIS MO 63118	
TITLE	VTC	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASTAGNO, JOHN D		NAME		
STREET ADDRESS	ONE BUSCH PL.		STREET ADDRESS		
CITY-ST-ZIP	ST. LOUIS, MO 63118		CITY-ST-ZIP		
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.					
SIGNATURE: _____			DATE: FEB 1 2005		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			314/577-7996		
John D. Castagno			Daytime Phone #		

ATTACHMENT

Officers and Directors

66001970
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Anheuser-Busch Wholesaler Development Corporation III

Principal Place of
Business:

One Busch Place
St. Louis, MO 63118

Officer

David A. Peacock
Laura H. Reeves
Lisa A. Joley
Anthony J. Short
John D. Castagno

Title

President
Secretary
Assistant Secretary
Vice President and Treasurer
Vice President and Tax Controller

Director

Lisa A. Joley
David A. Peacock
Anthony J. Short

Title

Director
Director
Director