


2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

02-15-2005 90047 001 *2,700.00

DOCUMENT # J26420		
1. Entity Name ILH COMPANY		

Principal Place of Business C/O CORPORATE TAX DEPARTMENT ONE BUSCH PLACE ST. LOUIS, MO 63118	Mailing Address C/O CORPORATE TAX DEPARTMENT ONE BUSCH PLACE ST. LOUIS, MO 63118
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66001978

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01262005 Chg-P CR2E034 (10/03)

4. FEI Number 59-2717181	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324		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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition SCHEDULE ATTACHED
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTZ, JOHN C. ONE BUSCH PLACE ST. LOUIS, MO <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	VP/TC CASTAGNO, JOHN ONE BUSCH PLACE ST LOUIS MO 63118 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAKER, W RANDOLPH ONE BUSCH PLACE SAINT LOUIS, MO 63118 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT KIMMINS, WILLIAM J. ONE BUSCH PLACE ST. LOUIS, MO 63118 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 1 2005

314/577-7996

Date

Daytime Phone #

John D. Castagno

ATTACHMENT

Officers and Directors

66001978
J26420

ILH Company

Principal Place of
Business:

One Busch Place
St. Louis, MO 63118

Officer

John C. Martz Jr.

Laura H. Reeves

William J. Kimmins Jr.

David C. Sauerhoff

John D. Castagno

Title

President

Secretary

Vice President and Treasurer

Assistant Treasurer

Vice President and Tax Controller

Director

W. Randolph Baker

Title

Director