

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

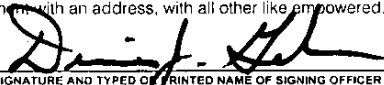
**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90050 041 \*\*\*150.00

**40073434**



04092008 Chg-P CR2E034 (12/06)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        |                                 |                                                                                                                     |                                                                                   |                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------|
| <b>DOCUMENT # 803438</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                        |                                 |                                                                                                                     |  |                                   |
| 1. Entity Name<br><b>ANHEUSER-BUSCH, INCORPORATED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |                                 |                                                                                                                     |                                                                                   |                                   |
| Principal Place of Business<br><b>ATTN: CORPORATE TAX DEPARTMENT<br/>ONE BUSCH PLACE<br/>ST LOUIS, MO 63118</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        |                                 | Mailing Address<br><b>ATTN: CORPORATE TAX DEPARTMENT<br/>ONE BUSCH PLACE<br/>ST LOUIS, MO 63118</b>                 |                                                                                   |                                   |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                        |                                 | 3. Mailing Address                                                                                                  |                                                                                   |                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |                                 | Suite, Apt. #, etc.                                                                                                 |                                                                                   |                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                        |                                 | City & State                                                                                                        |                                                                                   |                                   |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                | Zip                             | Country                                                                                                             | 4. FEI Number<br><b>43-0161000</b>                                                |                                   |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |                                 |                                                                                                                     | Applied For<br>Not Applicable                                                     |                                   |
| 6. Name and Address of Current Registered Agent<br><b>CT CORPORATION SYSTEM<br/>1200 S. PINE ISLAND ROAD<br/>PLANTATION, FL 33324</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |                                 |                                                                                                                     | 7. Name and Address of New Registered Agent                                       |                                   |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                                 |                                                                                                                     | Street Address (P.O. Box Number is Not Acceptable)                                |                                   |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                                 |                                                                                                                     | 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 _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                        |                                 |                                                                                                                     |                                                                                   |                                   |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2008 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                                 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees |                                                                                   |                                   |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                        |                                 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                               |                                                                                   |                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | VD                     | <input type="checkbox"/> Delete | TITLE                                                                                                               | <input type="checkbox"/> Change                                                   | <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | CARROLL, MARIE C       |                                 | NAME                                                                                                                |                                                                                   |                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ONE BUSCH PLACE        |                                 | STREET ADDRESS                                                                                                      |                                                                                   |                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SAINT LOUIS, MO 63118  |                                 | CITY-ST-ZIP                                                                                                         |                                                                                   |                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | VD                     | <input type="checkbox"/> Delete | TITLE                                                                                                               | <input type="checkbox"/> Change                                                   | <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | LACHKY, ROBERT C       |                                 | NAME                                                                                                                |                                                                                   |                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ONE BUSCH PLACE        |                                 | STREET ADDRESS                                                                                                      |                                                                                   |                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SAINT LOUIS, MO 63118  |                                 | CITY-ST-ZIP                                                                                                         |                                                                                   |                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | VS                     | <input type="checkbox"/> Delete | TITLE                                                                                                               | <input type="checkbox"/> Change                                                   | <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | BROWN, JOBETH C.       |                                 | NAME                                                                                                                |                                                                                   |                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ONE BUSCH PLACE        |                                 | STREET ADDRESS                                                                                                      |                                                                                   |                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SAINT LOUIS, MO 63118  |                                 | CITY-ST-ZIP                                                                                                         |                                                                                   |                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | T                      | <input type="checkbox"/> Delete | TITLE                                                                                                               | <input type="checkbox"/> Change                                                   | <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | KIMMINS, WILLIAM J JR. |                                 | NAME                                                                                                                |                                                                                   |                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ONE BUSCH PLACE        |                                 | STREET ADDRESS                                                                                                      |                                                                                   |                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SAINT LOUIS, MO 63118  |                                 | CITY-ST-ZIP                                                                                                         |                                                                                   |                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | CPD                    | <input type="checkbox"/> Delete | TITLE                                                                                                               | <input type="checkbox"/> Change                                                   | <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | BUSCH, AUGUST A IV     |                                 | NAME                                                                                                                |                                                                                   |                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ONE BUSCH PLACE        |                                 | STREET ADDRESS                                                                                                      |                                                                                   |                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SAINT LOUIS, MO 63118  |                                 | CITY-ST-ZIP                                                                                                         |                                                                                   |                                   |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | VTC                    | <input type="checkbox"/> Delete | TITLE                                                                                                               | <input type="checkbox"/> Change                                                   | <input type="checkbox"/> Addition |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | GELNER, DENNIS J       |                                 | NAME                                                                                                                |                                                                                   |                                   |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ONE BUSCH PLACE        |                                 | STREET ADDRESS                                                                                                      |                                                                                   |                                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SAINT LOUIS, MO 63118  |                                 | CITY-ST-ZIP                                                                                                         |                                                                                   |                                   |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        | 4/11/08                         |                                                                                                                     | 314/577-7996                                                                      |                                   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                        | Date                            |                                                                                                                     | Daytime Phone #                                                                   |                                   |
| DENNIS J GELNER, VP & TAX CONTROLLER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                                 |                                                                                                                     |                                                                                   |                                   |

# ATTACHMENT

## Officers and Directors

### Anheuser-Busch, Incorporated

Principal Place of  
Business:

One Busch Place  
St. Louis, MO 63118

40073434  
#803438

#### Officer

John P. Coleman  
Marlene V. Coulis  
Joseph D. Danklef  
Henry Dominguez  
Johnny Furr Jr.  
Robert J. Golden  
William B. Jones  
Robert C. Lachky  
Anthony J. Short  
Robert M. Tallett  
August A. Busch IV  
Douglas J. Muhleman  
Peter J. Kraemer  
Marie C. Carroll  
Thomas J. Adamitis  
Timothy E. Armstrong  
Evan C. Athanas  
Andrew R. Baldonado  
Joseph P. Castellano  
Phillip J. Colombatto  
David R. English  
Rodney D. Forth  
Gary M. Goldstein  
Joseph F. Jedlicka III  
Eugene D. Johnson, Jr.  
Francine I. Katz  
Jeremiah A. Mullane  
Michael J. Owens  
David A. Peacock  
Anthony T. Ponturo  
Jesus Rangel  
John W. Serbia  
Geoffrey J. Steinhart  
Raymond F. Steitz  
Mark A. Wahlgren  
JoBeth G. Brown  
Dennis J. Gelner  
John F. Kelly  
William J. Kimmins Jr.  
Laura H. Reeves  
Mark A. Rawlins

#### Title

Vice President of Sales - West  
Vice President - Consumer Insights and Innovations  
Vice President of Sales - Southeast  
Vice President of Sales - Southwest  
Vice President - Community Affairs  
Vice President - Mergers and Acquisitions  
Vice President of Sales - Midwest  
Vice President - Global Industry and Creative Development  
Vice President - Business and Wholesaler Development  
Vice President of Sales - Northeast  
Chairman of the Board and President  
Group Vice President - Brewing Operations and Technology  
Vice President - Operations  
Vice President - Finance and Planning  
Vice President - Procurement  
Vice President of Transportation and Logistics and Assistant Secretary  
Vice President - Wholesale Operations Division  
Region Vice President (West) - Government Affairs  
Vice President and Chief Information Officer  
Vice President - Quality Assurance  
Vice President - Marketing Strategy and Communication  
Region Vice President (Central) - Government Affairs  
Vice President - On-Premise Chain Sales and Draught Beer Development  
Vice President of Legal and State Affairs  
Vice President - National Retail Sales  
Vice President - Communications and Consumer Affairs  
Region Vice President (East) - Government Affairs  
Vice President - Business Operations  
Vice President - Marketing  
Vice President - Global Media & Sports Marketing  
Vice President - Sales Development  
Vice President - Brewing  
Vice President - Engineering  
Vice President - Sales Operations  
Vice President - Wholesale Operations Division  
Vice President & Secretary  
Vice President and Tax Controller  
Controller  
Treasurer  
Assistant Secretary  
Assistant Treasurer

#### Director

Thomas J. Adamitis  
Timothy E. Armstrong  
Evan C. Athanas  
W. Randolph Baker  
August A. Busch IV  
Marie C. Carroll  
Joseph P. Castellano

#### Title

Director  
Director  
Director  
Director  
Director  
Director  
Director

# ATTACHMENT

Officers and Directors

Phillip J. Colomatto  
Marlene V. Coulis  
Johnny Furr Jr.  
Michael S. Harding  
Joseph F. Jedlicka III  
Francine I. Katz  
Peter J. Kraemer  
Robert C. Lachky  
Keith S. Levy  
Douglas J. Muhleman  
Michael J. Owens  
David A. Peacock  
Anthony T. Ponturo  
Jesus Rangel  
Gary L. Rutledge  
John W. Serbia  
Geoffrey J. Steinhart

Director  
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