

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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01262005 Chg-P CR2E034 (10/03)

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		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 43-1246129	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$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 <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</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	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KRUGER, FREDERICK B		NAME	SCHEDULE ATTACHED	
STREET ADDRESS	ONE BUSCH PLACE		STREET ADDRESS		
CITY-ST-ZIP	SAINT LOUIS, MO 63118		CITY-ST-ZIP		
TITLE	VT	<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	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	REEVES, LAURA H.		NAME		
STREET ADDRESS	ONE BUSCH PLACE		STREET ADDRESS		
CITY-ST-ZIP	ST LOUIS, MO		CITY-ST-ZIP		
TITLE	VTC	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CASTAGNO, JOHN D		NAME		
STREET ADDRESS	ONE BUSCH PLACE		STREET ADDRESS		
CITY-ST-ZIP	SAINT LOUIS, MO 63118		CITY-ST-ZIP		
TITLE	AT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SAUERHOFF, DAVID C		NAME		
STREET ADDRESS	ONE BUSCH PLACE		STREET ADDRESS		
CITY-ST-ZIP	SAINT LOUIS, MO 63118		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CARGAS, MARTIN D		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 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: _____			FEB 1 2005 314/577-7996 <small>Date Daytime Phone #</small>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="text-align: center;"> John D. Castagno </div>					

ATTACHMENT

Officers and Directors

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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

Vice President and Tax Controller

Director

Martin D. Cargas

Frederick B. Kruger

Title

Director

Director