

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

**95 MAY -1 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F93000005692 (9)**
1. Corporation Name
BANNON CORPORATION

Principal Place of Business: **ONE BUSCH PL. ST. LOUIS MO 63118**
Mailing Address: **ONE BUSCH PL. ST. LOUIS MO 63118**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/15/1993	3a. Date of Last Report 04/29/1994
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 43-1663511	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

B1	Name
B2	Street Address (P.O. Box Number is Not Acceptable)
B3	
B4	City
B5	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature (typed or printed name of registered agent and the filer) (NOT) Registered Agent signature required when installing. (N/A)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CORRIGAN, THOMAS L.
STREET ADDRESS	ONE BUSCH PL.
CITY - ST - ZIP	ST. LOUIS MO 63118
TITLE	VD
NAME	SCHAEFER, JOHN J
STREET ADDRESS	ONE BUSCH PL.
CITY - ST - ZIP	ST. LOUIS MO 63118
TITLE	ASD
NAME	POWERS, PAUL B
STREET ADDRESS	ONE BUSCH PL.
CITY - ST - ZIP	ST. LOUIS MO 63118
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	900001476169
13 STREET ADDRESS	-05/04/95--01111--001
14 CITY - ST - ZIP	***4800.00 ***200.00
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	Schedule Attached
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(h), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Laura H. Reeves* **Laura H. Reeves, Secretary** **4/21/95** **314-577-2359**

RECEIVED APR 21 1995



FA13-5692

GLB
JVH

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

RECEIVED

MAY 10 1995

May 5, 1995

BANNON CORPORATION
ONE BUSCH PL.
ST. LOUIS, MO 63118

ANHEUSER-BUSCH COMPANIES, INC.
OFFICE OF THE SECRETARY

SUBJECT: BANNON CORPORATION
Ref. Number: F93000005692

Please be advised, we have received your document for the above corporation and your check(s) totaling \$200.00; however, the document **has not been filed** and is being returned for the following:

Complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not a valid FEI number. For FEI number assistance, call the IRS at 1-800-829-1040.

NOTE: YOU HAVE 30 DAYS FROM THE DATE OF THIS LETTER TO MAKE THE CORRECTIONS AND RETURN THE DOCUMENT AND NOT HAVE TO PAY THE LATE FEE OF \$25.00.

PLEASE RETURN A COPY OF THIS LETTER WITH THE CORRECTED DOCUMENT TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FLORIDA 32314.

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Antonio Mathews
ANNUAL_REPORTS Section

Letter number: 795A00022002

RECEIVED
MAY 16 1995
CORPORATE TAX DEPARTMENT

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

F03-5692

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BANNON CORPORATION

OFFICERS

(Business Address: One Busch Place, St. Louis, MO 63118)

Thomas L. Corrigan	President and Chief Executive Officer
John J. Schaefer	Vice President
William J. Kimmins	Treasurer
Laura H. Reeves	Secretary
Richard N. Hill	Assistant Treasurer
Paul B. Powers	Assistant Secretary
Albert R. Wunderlich	Tax Controller

DIRECTORS

Thomas L. Corrigan
John J. Schaefer
Paul B. Powers

Effective Date 1/1/94