
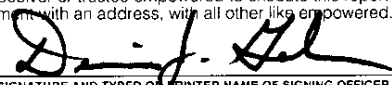


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

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

04-21-2008 90050 039 \*\*\*150.00

<b>DOCUMENT # F93000005692</b>					
1. Entity Name <b>BANNON CORPORATION</b>					
Principal Place of Business <b>ONE BUSCH PL. ST. LOUIS, MO 63118</b>			Mailing Address <b>CORPORATE TAX DEPT. ONE BUSCH PLACE ST. LOUIS, MO 63118 US</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>43-1663511</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. 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
			<b>FL</b>		
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>					
<b>FILE NOW!!! FEE IS \$150.00 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 NAME STREET ADDRESS CITY-ST-ZIP	PD GRABE, DAVID ONE BUSCH PL. ST. LOUIS, MO 63118	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D DEAN, JAMES B 7007 SEA WORLD DRIVE ORLANDO FL 32821	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/TC GELNER, DENNIS J ONE BUSCH PL. ST. 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	ASD POWERS, PAUL B ONE BUSCH PL. ST. 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	VP MARTZ, JOHN C. J ONE BUSCH PLACE ST. LOUIS, MO 63118	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARTZ, JOHN C JR 8000 MARYLAND AVE SUITE 350 ST LOUIS MO 63105-3752	<input checked="" 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REEVES, LAURA H. 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 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

### Bannon Corporation

Principal Place of  
Business:

One Busch Place  
St. Louis, MO 63118

40073436  
#F93 00005692

#### Officer

James B. Dean  
John C. Martz Jr.  
William J. Kimmins Jr.  
Dennis J. Gelner  
Laura H. Reeves  
Paul B. Powers  
Mark A. Rawlins

#### Title

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

#### Director

James B. Dean  
Howard J. Demsky  
Paul B. Powers

#### Title

Director  
Director  
Director