## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT #



**FILED** Jan 27, 2003 8:00 am Secretary of State

01-27-2003 90505 001 \*2,700.00

			600 x	3 180				
Principal Plac	ce of Business	Mailing Address	<u>.</u>					
ONE BUSCH I		•	•			rrangaga		
			CORPORATE TAX DEPT.			55003030		
ST. LOUIS MO 63118		ONE BUSCH PLACE	ONE BUSCH PLACE					
		ST. LOUIS MO 63118		}	D ARBEANN ILLA PREMI ALEMAN MENTE MATTE	BOUR DOWN BEING BRIDE	1988 1181 (GB)	
		US				#8## 8### 88## 8### 8### 8#### ######		
Principal Place of Business     3. Mailing Address					1   <b>                                   </b>	ABIII BAIN DAIBH AIND BIIND I		
at maning reasons								
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		C OUTON LIEDE N	- MAKIND OUMDOED		
•				ŀ	☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		. FEI Number	Ar	oplied For	
					43-1663511	N <sub>t</sub>	ot Applicable	
Zip Country		Zìp	Country		Continue of Status Desired	□ \$8.75 Add	ditional	
	·			) 3	Certificate of Status Desired	Fee Require		
	6. Name and Address of Curre	ent Registered Agent		7.	. Name and Address of New Re	gistered Agent		
·····								
C T CORPORATION SYSTEM			0	,				
	INE ISLAND RD.		Street A	aaress (P.O.	P.O. Box Number is Not Acceptable)			
	ON FL 33324							
FLANTAIN	ON FL 33324						_	
			City			FL   Zip Cod	le	
8 The above	e named entity submits this statemen	t for the purpose of changing its	registered office o	r registered :	agent, or both, in the State of Flori	ida I am familiar with	and accept	
	tions of registered agent.	in to the perpede of changing its	rogistored emiss of	, rogiotoroa i	agont, or boart, in the state of Figure	ioo. Tarritarina mar	and docopt	
SIGNATURE	Signature, typed or printed name of registered ac	41015					<del></del>	
	Signature, typed or printed name of registered ag	pent and title if applicable. (NOTE	: Registered Agent signat	ure required whe	n reinstating)	DATE		
F	TLE NOW!!! FEE IS \$150.00				• Floation Compoign Fina			
After May 1, 2003 Fee will be \$550.00					<ol> <li>Election Campaign Fina Trust Fund Contribution.</li> </ol>	~	0 May Be	
Make Check	k Payable to Florida Departmen	t of State			ildst i und Commodion.	□ A0060	101665	
10.	OFFICERS AI	ND DIRECTORS	11.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	S IN 11	
TITLE	PD	X Delete	TITLE	P/D		☐ Change	X Addition	
NAME	SCHAEFER, JOHN J		NAME		, DAVID	_		
	ONE BUSCH PL.		STREET ADDRESS	ONE BI	ÚSCH PLACE			
CITY-ST-ZIP	ST. LOUIS MO 63118	77.87i.id	CITY-ST-ZIP	ST LO	UIS MO 63118			
TITLE	TC	☐ Delete	TITLE				Addition	
NAME	CASTAGNO, JOHN D		NAME					
STREET ADDRESS	ONE BUSCH PL.		STREET ADDRESS					
CITY-ST-ZIP	ST. LOUIS MO 63118		CITY-ST-ZIP					
TITLE	ASD	☐ Delete	TITLE			☐ Change	Addition	
NAME	POWERS, PAUL B		NAME			V		
ATREET 4000000	la		STREET ADDRESS	SCHEI	DULE ATTACHED			
CITY-ST-ZIP	ONE BUSCH PL.	· ·	CITY-ST-ZIP	DOLLE	DOLE ATTACHED			
<del></del>	ST. LOUIS MO 63118		·					
TITLE	VP	☐ Delete	TITLE	İ		Change	☐ Addition	
NAME	MARTZ, JOHN C. J		NAME					
STREET ADDRESS	ONE BUSCH PLACE		STREET ADDRESS	ļ				
CITY-ST-ZIP	ST. LOUIS MO 63118		CITY-ST-ZIP					
TITLE	VT	☐ Delete	TITLE			☐ Change	☐ Addition	
NAME	KIMMINS, WILLIAM J.		NAME					
STREET ADDRESS	ONE BUSCH PLACE		STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	ļ .			(	
	ST. LOUIS MO 63118		<del></del>	ļ	<u></u>			
TITLE	S	☐ Delete	TITLE			☐ Change	Addition	
NAME	REEVES, LAURA H.		NAME	l				

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. JOHN D CASTAGNO

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS ONE BUSCH PLACE

ST. LOUIS MO 63118

REQUIRIAN CONTROLLER

1/15/03

314/577-7996

Daytime Phone #

## Officers and Directors

**Bannon Corporation** 

Principal Place of **Business:** 

One Busch Place St. Louis, MO 63118

Officer

David Grabe John C. Martz Jr. Laura H. Reeves

Paul B. Powers William J. Kimmins Jr.

David C. Sauerhoff John D. Castagno

Director David Grabe Title President Vice President Secretary

Vice President and Treasurer

Assistant Treasurer Tax Controller

Assistant Secretary

**Title** Director

Paul B. Powers Director John J. Schaefer Director Attachment 55003030 AF93000005692