


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90080 004 ***150.00

DOCUMENT # G05752	
1. Entity Name HSH OF ORLANDO, INC.	

Principal Place of Business 7007 SEA WORLD DR ORLANDO, FL 32821 US	Mailing Address C/O CORPORATE TAX DEPARTMENT ONE BUSCH PLACE ST. LOUIS, MO 63118
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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

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	
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40024971



01042007 Chg-P CR2E034 (12/06)

4. FEI Number 59-2540009	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	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: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KASEN, KEITH M ONE BUSCH PLACE SAINT LOUIS, MO 63118 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D KASEN, KEITH M 231 S BEMISTON SUITE 600 CLAYTON MO 63105-1914 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REEVES, LAURA H. ONE BUSCH PLACE ST. LOUIS, MO <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	VT KIMMINS, WILLIAM J JR. ONE BUSCH PLACE SAINT 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	VTC GELNER, DENNIS J ONE BUSCH PLACE SAINT 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	AT RAWLINS, MARK A ONE BUSCH PLACE SAINT 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	AS GRABE, DAVID ONE BUSCH PLACE SAINT LOUIS, MO 63118 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GRABE, DAVID J 231 S BEMISTON SUITE 600 CLAYTON MO 63105-1914 <input checked="" 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:  1/5/07 314/577-7996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

DENNIS J GELNER, VP & TAX CONTROLLER

Attachment
Officers and Directors

40024971
605 752

HSH of Orlando, Inc.

Principal Place of Business: 7007 Sea World Drive
Orlando, FL 32821

Mailing Address:: One Busch Place
St. Louis, MO 63118

Officer

Keith M. Kasen
William J. Kimmins Jr.
Dennis J. Gelner
Laura H. Reeves
David J. Grabe
Mark A. Rawlins

Title

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

Director

Keith M. Kasen

Title

Director