
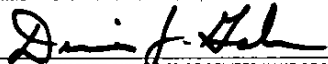


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90448 001 \*2,850.00

<b>DOCUMENT # P12701</b> 1. Entity Name <b>WHOLESALE EQUITY DEVELOPMENT CORPORATION</b>					
Principal Place of Business <b>ATT: CORPORATE TAX DEPT. ONE BUSCH PLACE ST. LOUIS, MO 63118-8852</b>			Mailing Address <b>ATT: CORPORATE TAX DEPT. ONE BUSCH PLACE ST. LOUIS, MO 63118-8852</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02152006    Chg-P    CR2E034 (11/05)	
4. FEI Number <b>43-1341343</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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	<b>CCEO PEACOCK, DAVID A ONE BUSCH PLACE SAINT LOUIS, MO 63118</b> <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	<b>PD SHORT, ANTHONY J ONE BUSCH PLACE SAINT LOUIS, MO 63118</b> <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	<b>VTD KIMMINS, WILLIAM J JR. ONE BUSCH PLACE SAINT LOUIS, MO 63118</b> <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	<b>VTCD CASTAGNO, JOHN D ONE BUSCH PLACE SAINT LOUIS, MO 63118</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V/TC/D GELNER, DENNIS J ONE BUSCH PLACE ST LOUIS MO 63118</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S REEVES, LAURA H. ONE BUSCH PLACE ST LOUIS, MO</b> <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	<b>AT SAUERHOFF, DAVID C ONE BUSCH PLACE ST LOUIS, MO</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AT RAWLINS, MARK A ONE BUSCH PLACE ST LOUIS MO 63118</b> <input type="checkbox"/> Change <input checked="" 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.					
<b>SIGNATURE:</b> 		<b>DENNIS J GELNER</b> <b>VP &amp; TAX CONTROLLER</b>		<b>314/577-7996</b> <b>2/20/06</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

66005633



# ATTACHMENT

Officers and Directors

66005633  
#P12701

## Wholesaler Equity Development Corporation

Principal Place of Business: One Busch Place  
St. Louis, MO 63118

### Officer

David A. Peacock  
Anthony J. Short  
William J. Kimmins Jr.  
Dennis J. Gelner  
Laura H. Reeves  
Mark A. Rawlins

### Title

Chairman of the Board and Chief Executive Officer  
President  
Vice President and Treasurer  
Vice President and Tax Controller  
Secretary  
Assistant Treasurer

### Director

Dennis J. Gelner  
William J. Kimmins Jr.  
Frederick B. Kruger  
David A. Peacock  
Anthony J. Short  
Patrick T. Stokes

### Title

Director  
Director  
Director  
Director  
Director  
Director