	ition Annual Report Form	2. Registered Agent and	Office NO	TAPO BOX	
Due No Later Ti	1		2. Registered Agent and Office NOT A P.O. BOX		
Due No Later Than November 1, 1991		C T CORPORATION SYSTEM			
1: Mailing Address —	Please Correct, If Not Correct	300 N. 6,TH S	TREET		
CONSOLIDATE	NALD-Wa- KLOTH Attn: Corp. Tax De	BOISE	IO	8 37J1	
ONE BUSCH P		of DE	he Laws		
ST. LOUIS	MO 63118	NO: 082416			
and Directors	¹ 11.				
<u>Name</u>	Street or P.O. Address	<u>City</u>	<u>State</u>	<u>Zip</u>	
	One Busch Place One Busch Place	St. Louis St. Louis	MO MO	63118 63118	
	See Schedule Attached	i			
6. I certify the true, corre	at this Annual Report has been exect and complete	amined by me and is to the	best of my k	inowledge	
Signature	Hurakows				
Name (Typed o	Yaura H. Reeves	Title ASS	istant 3	ecretary	
	ONE BUSCH P ST. LOUIS and Directors Name Id W. Kloth H. Hoskins	ST. LOUIS MO 63118 and Directors Name Street or P.O. Address Id W. Kloth One Busch Place H. Hoskins One Busch Place See Schedule Attached See Schedule Attached frue, correct and complete. Signature August August Name (Paper) Place Name (Paper) or Vaura H. Reeves	ONE BUSCH PLACE ST. LOUIS MO 63118 NO: Cd2416 and Directors Name Street or PO. Address City Id W. Kloth One Busch Place St. Louis H. Hoskins One Busch Place St. Louis See Schedule Attached 6. I certify that this Annual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete. Signature Manual Report has been examined by me and is to the true, correct and complete.	ONE BUSCH PLACE ST. LOUIS MO 63118 NO: C22416 and Directors Name Street or P.O. Address City State Id W. Kloth One Busch Place St. Louis MO H. Hoskins One Busch Place St. Louis MO See Schedule Attached 6. I certify that this Annual Report has been examined by me and is to the best of my k true, correct and complete. Signature Signature Date 7/29/91 Name Prince() Place St. Title ASSISTANT St.	

CONSOLIDATED FARMS, INC.

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

OFFICERS

Raymond E. Goff

Donald W. Kloth Melvern K. Anderson Paul H. Hoskins Laura H. Reeves Gerald C. Thayer Richard N. Hill Albert R. Wunderlich Chairman of the Board and Chief Executive Officer

President

Vice President and General Manager

Assistant Secretary

Treasurer

Assistant Treasurer

Tax Controller

DIRECTORS

Raymond E. Goff Donald W. Kloth Patrick T. Stokes Melvern K. Anderson (Vacancy)

EFFECTIVE 11/02/89 42-1L