2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 243424

Name:

Address: City-St-Zip: GILLS, ELAINE R.

91 S. MYRTLE AVE

JACKSONVILLE, FL 32204

Entity Name: DUVAL CONTAINER COMPANY

FILED Feb 16, 2009 Secretary of State

Current Pr	incipal Place o	of Business:	New Principal Place	New Principal Place of Business:	
	MYRTLE AVE /ILLE, FL 3220	4			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX 4 JACKSON	11006 /ILLE, FL 3220	3			
FEI Number:	59-0918216	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
	HARD L. FLE AVENUE VILLE, FL 3220	4 US			
The above in the State		bmits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
Election Carr	paign Financing 1	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () D GILLS, RICHARD 91 S MYRTLE AV JACKSONVILLE,	E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () C GILLS, RICHARD 91 S MYRTLE AV JACKSONVILLE,	E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	ST ()D	elete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD L. GILLS PD 02/16/2009