

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 822000

FILED
Jan 04, 2007
Secretary of State

Entity Name: SMITH CONTAINER CORPORATION

Current Principal Place of Business:

10330 OLD OLIVE STREET ROAD
ST. LOUIS, MO 63141 US

New Principal Place of Business:

Current Mailing Address:

10330 OLD OLIVE STREET ROAD
ST. LOUIS, MO 63141 US

New Mailing Address:

FEI Number: 58-0684254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STROPE, KEITH
Address: 17336 COUNTRYSIDE MANOR PARKWAY
City-St-Zip: CHESTERFIELD, MO

Title: V () Delete
Name: TZINBERG, NEIL
Address: 14021 BOXFORD COURT
City-St-Zip: CHESTERFIELD, MO

Title: S () Delete
Name: ROSE, MARILYNN
Address: 116 SAVANNAH CT.
City-St-Zip: MARINE, IL

Title: T () Delete
Name: SCHOEN, MARK
Address: 1006 REMINGTON OAKS CT.
City-St-Zip: FENTON, MO

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: MARK SCHOEN

_____ Electronic Signature of Signing Officer or Director

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01/04/2007

_____ Date