

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 830387**

1. Entity Name

**METAL CONTAINER CORPORATION****FILED****Apr 26, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90414 001 \*2,850.00

**9937**

DO NOT WRITE IN THIS SPACE

Principal Place of Business S GEYER RD STE 400 ST. LOUIS MO 63127 US	Mailing Address ATTN: CORPORATE TAX DEPARTMENT ONE BUSCH PLACE ST LOUIS MO 63118-1849
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number	43-1009110	Applied For
		Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required

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

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.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS	
TITLE	VP <input checked="" type="checkbox"/> Delete
NAME	WILKENLOH, WILLIAM C.
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS, MO 00000
TITLE	AT <input checked="" type="checkbox"/> Delete
NAME	HILL, RICHARD N.
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS, MO 00000
TITLE	TD <input checked="" type="checkbox"/> Delete
NAME	THAYER, GERALD C
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS, MO 00000
TITLE	S <input type="checkbox"/> Delete
NAME	REEVES, LAURA H.
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS, MO 00000
TITLE	AS <input checked="" type="checkbox"/> Delete
NAME	IVERSON, STEVEN R.
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS, MO 00000
TITLE	CP <input checked="" type="checkbox"/> Delete
NAME	BERACHA, BARRY H
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS, MO 00000

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	C/P/CEO/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLTZMAN, JOSEPH L
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS MO 63118
TITLE	V/T/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIMMINS, WILLIAM J JR
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS MO 63118
TITLE	TC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASTAGNO, JOHN D
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS MO 63118
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	V/COO/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGELHUBER, JAMES E
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS MO 63118
TITLE	V/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COPESTICK, ALLAN T
STREET ADDRESS	ONE BUSCH PLACE
CITY-ST-ZIP	ST LOUIS MO 63118

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR John D. Castagno, Tax Controller 4/10/00 314/577-7996  
Date Daytime Phone #

CR2E034 (9/99)

03/30/2000

## Officers and Directors

### Metal Container Corporation

Principal Place of Business: 3636 S Geyer Road  
Suite 400  
St. Louis, MO 63127

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

830387  
9937

<u>Officer</u>	<u>Title</u>
Joseph L. Goltzman	Chairman of the Board, President, & Chief Executive Officer
James E. Engelhuber	Exec Vice President & Chief Operating Officer
Robert F. Wellise	Senior Vice President-Manufacturing & Technology
Allan T. Copestick	Vice President-Sales and Marketing
Jerome A. Riley	Vice President-Human Resources
Charles Rothofsky	Vice President-Lid Manufacturing & Technology
Mark V. Stafford	Vice President-Quality
Laura H. Reeves	Secretary
William J. Kimmins Jr.	Vice President and Treasurer
David C. Sauerhoff	Assistant Treasurer
John D. Castagno	Tax Controller

<u>Director</u>	<u>Title</u>
Gary A. Bybee	Director
Marie C. Carroll	Director
Phillip J. Colombatto	Director
Allan T. Copestick	Director
Michael D'Amato	Director
James E. Engelhuber	Director
Royce J. Estes	Director
Joseph L. Goltzman	Director
James F. Hoffmeister	Director
Steven R. Iverson	Director
William J. Kimmins Jr.	Director
Donald W. Kloth	Director
Aloys H. Litteken	Director
William L. Rammes	Director
Joseph P. Sellinger	Director
Robert F. Wellise	Director