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FILED
May 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000000284 (7)

1. Corporation Name

BALL METAL BEVERAGE CONTAINER CORP.

Principal Place of Business

% LAW DEPT.
10 LONGS PEAK DRIVE
BROOMFIELD CO 80021

Mailing Address

P O BOX 2407-TAX DEPT
MUNCIE IN 47307
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/17/1996

4. FEI Number

84-1326644

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CCEO ☐ DELETE

NAME MATSIK, GEORGE A
STREET ADDRESS 9300 W 108TH CIRCLE
CITY-ST-ZIP BROOMFIELD CO

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD ☐ DELETE

NAME HOOVER, R D
STREET ADDRESS 345 SOUTH HIGH STREET
CITY-ST-ZIP MUNCIE IN

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME SISSEL, GEORGE A
STREET ADDRESS 345 SOUTH HIGH STREET
CITY-ST-ZIP MUNCIE IN

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE P ☐ DELETE

NAME MIDGETT, LEON A
STREET ADDRESS 9300 WEST 108TH CIRCLE
CITY-ST-ZIP BROOMFIELD CO

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE S ☐ DELETE

NAME LEWIS, DONALD C
STREET ADDRESS 10 LONGS PEAK DRIVE
CITY-ST-ZIP BROOMFIELD CO

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE AS ☐ DELETE

NAME CANNON, SHEILA D
STREET ADDRESS 345 SOUTH HIGH STREET
CITY-ST-ZIP MUNCIE IN

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)