

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 433479

**Entity Name:** DESIGN CONTAINERS, INC.

**Current Principal Place of Business:**

2913 WESTSIDE BLVD.  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

2913 WESTSIDE BLVD.  
JACKSONVILLE, FL 32209

**FEI Number:** 59-1483955

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SAMUEL VICKERS  
2913 WESTSIDE BLVD.  
JACKSONVILLE, FL 32209 US

*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

**Officer/Director Detail :**

Title PD  
Name VICKERS, EDGAR B  
Address 2913 WESTSIDE BLVD  
City-State-Zip: JACKSONVILLE FL 32209

Title D  
Name TALBOT, THOMAS W  
Address 927 FIELDSTONE DR.  
City-State-Zip: MACON GA 31210

Title CD  
Name VICKERS, SAMUEL H  
Address 2913 WESTSIDE BLVD  
City-State-Zip: JACKSONVILLE FL 32209

Title VP  
Name KELLEY, GERALD PJR  
Address 2913 WESTSIDE BLVD  
City-State-Zip: JACKSONVILLE FL 32209

*I hereby 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 all other like empowered.*

**SIGNATURE: SAMUEL H. VICKERS**

**CEO**

**04/08/2013**

Electronic Signature of Signing Officer/Director Detail

Date