

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000007525

**Entity Name:** ALPHA PACKAGING (SOUTHEAST) INC.

**Current Principal Place of Business:**

1550 NORTH ELLIS ROAD  
JACKSONVILLE, FL 32254

**Current Mailing Address:**

1550 NORTH ELLIS ROAD  
JACKSONVILLE, FL 32254

**FEI Number:** 33-1148333

**Certificate of Status Desired:** No

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

NATIONAL CORPORATE RESEARCH, LTD., INC.  
155 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 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 CFO  
Name MARCELY, MIKE  
Address 1555 PAGE INDUSTRIAL BOULEVARD  
City-State-Zip: ST. LOUIS MO 63132

Title S  
Name CRESTON, DANIEL  
Address 1555 PAGE INDUSTRIAL BOULEVARD  
City-State-Zip: ST. LOUIS MO 63132

Title T  
Name DWYER, KELLY  
Address 1555 PAGE INDUSTRIAL BOULEVARD  
City-State-Zip: ST. LOUIS MO 63132

Title D  
Name CARPENTER, PHIL  
Address 277 PARK AVENUE, 39TH FLOOR  
City-State-Zip: NEW YORK NY 10172

Title D  
Name YATES, PHIL  
Address 277 PARK AVENUE, 39TH FLOOR  
City-State-Zip: NEW YORK NY 10172

Title PRESIDENT  
Name KELLAR, JEFF  
Address 1555 PAGE INDUSTRIAL BLVD  
City-State-Zip: ST. LOUIS MO 63132

*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:** KELLY DWYER

**TREASURER**

**03/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date