

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000234

Entity Name: PORTOLA PACKAGING, INC.

FILED  
Mar 27, 2009  
Secretary of State

## Current Principal Place of Business:

951 DOUGLAS ROAD  
BATAVIA, IL 60510

## New Principal Place of Business:

## Current Mailing Address:

1902 NEW BUTLER RD.  
NEW CASTLE, PA 16107

## New Mailing Address:

FEI Number: 94-1582719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPAMERICA, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: MR ( ) Delete  
Name: BAUERBACH, BRIAN  
Address: 41 W 722 N BOWGREN CIR  
City-St-Zip: ELBURN, IL 60119

Title: MR ( ) Delete  
Name: LABAHN, JOHN  
Address: 204 EDINBURG CT  
City-St-Zip: NAPERVILLE, IL 60540

Title: MR ( ) Delete  
Name: WEHRENBURG, KIM  
Address: 538 BRAEMER AVE  
City-St-Zip: NAPERVILLE, IL 60119

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: MURNANE, WILLIAM  
Address: 701 EAST LAKE STREET  
City-St-Zip: WAYZATA, MN 55391

Title: CFO (X) Change ( ) Addition  
Name: FISH, GLENN  
Address: 3306 S. CARPENTER ST  
City-St-Zip: CHICAGO, IL 60608

Title: SEC (X) Change ( ) Addition  
Name: WEHRENBURG, KIM  
Address: 538 BRAEMER AVE  
City-St-Zip: NAPERVILLE, IL 60119

Title: VP ( ) Change (X) Addition  
Name: SCHRY, ANDREA  
Address: 3527 ELLWOOD ROAD  
City-St-Zip: NEW CASTLE, PA 16101

I hereby certify that the information supplied with this filing does not qualify 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: ANDREA B SCHRY

VP

03/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date