2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 08:00 AM
Secretary of State

DOCUMENT # F02000000506

1. Entity Name
SSA CONTAINERS, INC.

Principal Place of Business	Mailing Address
1131 S.W. KLICKITAT WAY SEATTLE, WA 98134	1131 S.W. KLICKITAT WAY SEATTLE, WA 98134

DO NOT WRITE IN THIS SPACE

01202006 No Chg-P CR2E034 (11/05)

4. FEI Number
91-1703381
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000001479517
04/10/06-80007-022 150.00

10. OFFICERS AND DIRECTORS

TITLE	DST
NAME	HEMINGWAY, JON F
STREET ADDRESS	1131 S.W. KLICKITAT WAY
CITY-ST-ZIP	SEATTLE, WA 98134
TITLE	VCFO
NAME	SADOSKI, CHARLES F
STREET ADDRESS	1131 S.W. KLICKITAT WAY
CITY-ST-ZIP	SEATTLE, WA 98134
TITLE	D
NAME	SMITH, FREDERICK D
STREET ADDRESS	1131 S.W. KLICKITAT WAY
CITY-ST-ZIP	SEATTLE, WA 98134
TITLE	P
NAME	DENIKE, EDWARD A
STREET ADDRESS	1131 S.W. KLICKITAT WAY
CITY-ST-ZIP	SEATTLE, WA 98134
TITLE	VP
NAME	DIBERNARDO, JOHN J
STREET ADDRESS	700 PIER A PLAZA
CITY-ST-ZIP	LONG BEACH, CA 90813
TITLE	VPGC
NAME	LUKINS, KYLE B
STREET ADDRESS	1131 S.W. KLICKITAT WAY
CITY-ST-ZIP	SEATTLE, WA 98134

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles F. Sadoski, Sr. VP - CFO 3/10/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #