


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2005 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| DOCUMENT # P03000018602                       |  |
| 1. Entity Name<br>EFFICIENT CONTAINER COMPANY |   |

|   |   |
|---|---|
| Principal Place of Business<br>POST OFFICE BOX 20287<br>ST. SIMONS ISLAND, GA 31522 | Mailing Address<br>POST OFFICE BOX 20287<br>ST. SIMONS ISLAND, GA 31522 |
|---|---|

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03282005 No Chg-P CR2E034 (10/03)

|   |                                |
|---|--------------------------------|
| 4. FEI Number<br>05-0568426                               | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

|   |                                       |
|---|---------------------------------------|
| 6. Name and Address of Current Registered Agent<br><br>SMITH HULSEY & BUSEY<br>225 WATER STREET<br>SUITE 1800<br>JACKSONVILLE, FL 32202   | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
| 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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable</small> | (NOTE: Registered Agent signature required when reinstating) | DATE _____ |
|--|--|------------|

|   |   |
|---|---|
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2005 Fee will be \$550.00</b> | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be<br>Added to Fees |
|---|---|

| 10. OFFICERS AND DIRECTORS                     |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DIR<br>ZELL, HAROLD E<br>101 WORTHING ROAD<br>ST. SIMONS ISLAND, GA 31522 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DIR<br>ROBINSON, LARRY M<br>2318 MORSE STREET<br>HOUSTON, TX 77019        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DIR<br>MILLER, DAVID F<br>1610 SOUTH 8TH STREET<br>FERNANDINA BEACH, FL   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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|---|---------|--------------|
| 12. 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 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: <i>Harold E. Zell</i>  | 3/30/05 | 912-638-3449 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>   |         |              |