

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000168375

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** CROWN PACKAGING CORP. OF MISSOURI

**Current Principal Place of Business:**

17854 CHESTERFIELD AIRPORT ROAD  
CHESTERFIELD, MO 63005

**New Principal Place of Business:**

**Current Mailing Address:**

17854 CHESTERFIELD AIRPORT ROAD  
CHESTERFIELD, MO 63005

**New Mailing Address:**

**FEI Number:** 43-0926789

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURKE, BARBARA A  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ANTHON, FRED L  
Address: 17854 CHESTERFIELD AIRPORT ROAD  
City-St-Zip: CHESTERFIELD, MO 63005

Title: SEC.  
Name: ANTHON, FRED L  
Address: 17854 CHESTERFIELD AIRPORT ROAD  
City-St-Zip: CHESTERFIELD, MO 63005

Title: TRES  
Name: HUNT, RAY D  
Address: 17854 CHESTERFIELD AIRPORT ROAD  
City-St-Zip: CHESTERFIELD, MO 63005

Title: VP  
Name: HOFFMANN, DONALD F  
Address: 17854 CHESTERFIELD AIRPORT ROAD  
City-St-Zip: CHESTERFIELD, MO 63005

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: RAY D HUNT

TRES

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date