2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# P07000100691

Entity Name: CAPITAL CONTAINERS, INC

Current Principal Place of Business:

PAUL CARLSON
2750 OLD ST AUGUSTINE RD. APT. R180
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PAUL CARLSON
2750 OLD ST AUGUSTINE RD. APT. R180
TALLAHASSEE, FL 32301

New Mailing Address:

PAUL CARLSON
240 SPARKLEBERRY BLVD
QUINCY, FL 32351

FEI Number: 26-1137418 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONE, CECIL
1429 COREY RIDE ST.
TALLAHSSEE, FL 32312 US

Name and Address of New Registered Agent:

CONE, CECIL VP
1429 COVEY RIDE ST.
TALLAHSSEE, FL 32312 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: CECIL CONE 04/27/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CARLSON, PAUL
Address: 2750 OLD ST AUGUSTINE RD APT R180
City-St-Zip: TALLAHASSEE, FL 32301

Title: V ( ) Delete
Name: CONE, CECIL
Address: 2750 OLD ST AUGUSTINE RD APT R180
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CARLSON, PAUL
Address: 240 SPARKLEBERRY BLVD
City-St-Zip: QUINCY, FL 32351

Title: VP (X) Change ( ) Addition
Name: CONE, CECIL
Address: 1429 COVEY RIDE ST
City-St-Zip: TALLAHASSEE, FL 32312

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: PAUL CARLSON P 04/27/2008
Electronic Signature of Signing Officer or Director Date