## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** May 03, 2004 8:00 am Secretary of State

05-03-2004 90733 013 \*\*\*150.00

(314) 746-1100 Daytime Phone #

DOCUMENT # P14309  1. Entity Name STONE CONTAINER CORPORATION						05-03-2004 90733 013 ***150.00						
OTONE	ONTAINEN CONTORATIO	,										
Principal Place of Business		Mailing Address		L	$\neg \neg$	•	•			-		
TAX DEPARTMENT 8182 MARYLAND AVE SAINT LOUIS, MO 63105 US		TAX DEPARTMENT 8182 MARYLAND AVE SAINT LOUIS, MO 63105 U		S			røl (tar: Pikad ):	ilm allin illi	Braft Albir B	I BII GIGIY SYBIY SYB	 Mari (( (rd)	
2. Principal Place of Business		3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04202004	L Chg-	.Р	CR2E	034 (10/03)			
City & State		City & State			4. FEI Number Applied Fo. 36-2041256 Not Applie			plied For of Applicable				
Zip	Country	Zip Cou		itry		5. Certificate of Status Desired			\$8.75 Additional Fee Required			
		7. Name and Address of New Registered Agent Name										
CT CORPORATION SYSTEM				Street Address (P.O. Box Number is Not Acceptable)								
	NE ISLAND ROAD ON, FL 33324			Circui Addices (F.O. DOX INDITION FOR ACCEPTANCE)								
			City	Tity FL Zip Code								
8. The above	register	red office or registered agent, or both, in the State of Florida. I am familiar with, and accept										
	ions of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and little II applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
	·	Q. Flastice Comme					1			·	···	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campai Trust Fund Contr			<b>\$5.</b> • Adde	<b>00</b> May Be ed to Fees		•				
10.	OFFICERS AND		11.			ADDITION	S/CHANGE	S TO OFFI	CERS AN	ID DIRECTOR		
TITLE	AT MARRA, RICHARD P	Delete	TITL							☐ Change	Addition	
STREET ADDRESS	8182 MARYLAND AVENUE			EET ADDRESS								
CITY-ST-ZIP	SAINT LOUIS, MO 63105		CITY	r-ST-ZIP							<u></u>	
TITLE	PCEO MOORE, PATRICK J	☐ Delete	TITL	i						Change	Addition	
STREET ADDRESS	8182 MARYLAND AVE			EET ADDRESS								
CITY-ST-ZIP	SAINT LOUIS, MO 63105		cm	Y-ST-ZiP								
TITLE	VPS	Delete _	TITL							Change	Addition	
NAME CYDEST ADDRESS	HUNT, CRAIG A		NAM	ME REET ADDRESS								
STREET ADDRESS CITY - ST - ZIP	8182 MARYLAND AVENUE   SAINT LOUIS, MO <del>63101</del>			Y-ST-ZIP	SAI	NT LOU	IS, MO	6310	)5			
TITLE	VPCF	☐ Delete	TIT	.E		··-				☐ Change	Addition	
NAME	HINRICHS, CHARLES A		NAM	ME								
STREET ADDRESS	8182 MARYLAND AVE			EET ADDRESS Y-ST-ZIP								
CITY-ST-ZIP	SAINT LOUIS, MO 63105	[7] p	_				<u></u>			Change	Addition	
TITLE NAME	KAUFMANN, PAUL	☐ Delete	TITI	1						Change	L. Addition	
STREET ADDRESS	8182 MARYLAND AVE.		STR	REET ADDRESS								
CITY-ST-ZIP	SAINT LOUIS, MO 63105		CIT	Y-ST-ZIP		- <u>-</u>						
TITLE	VT PEVEDEDODEED JEEEDEV S	☐ Delete	TITI	1						🔀 Change	Addition Addition	
NAME STREET ADDRESS	BEYERSDORFER, JEFFREY S 8182 MARYLAND AVENUE		NA! STE	ME REET ADDRESS								
CITY-ST-ZIP	SAINT LOUIS, MO 83101			Y-ST-ZiP	SAI	NT LOU	IS, MO	6310	)5			
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 aggress with all other like empowered.												

PAUL K. KAUFMANN

SAUL L. XAYGUM PAUL.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: