2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# P19455

Entity Name: SOUTHEASTERN CONTAINER, INC.

Current Principal Place of Business:

1250 SANDHILL ROAD
ENKA, NC 28728

New Principal Place of Business:

Current Mailing Address:

1250 SANDHILL ROAD
PO BOX 909
ENKA, NC 28728 US

New Mailing Address:

FEI Number: 56-1336585 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FRANCIS, THOMAS
Address: 265 W. BROOKE RD.
City-St-Zip: WINCHESTER, VA 22604

Title: VP ( ) Delete
Name: PINTO, HENRY M
Address: 1250 SAND HILL RD
City-St-Zip: ENKA, NC 28728

Title: VPF ( ) Delete
Name: CAPPS, CHARLES D
Address: 1250 SAND HILL RD
City-St-Zip: ENKA, NC 28728

Title: VPMS ( ) Delete
Name: PHILLIPS, CATHY R
Address: 1250 SAND HILL RD
City-St-Zip: ENKA, NC 28728

Title: VPHR ( ) Delete
Name: YANIK, MICHELLE
Address: 1250 SAND HILL RD
City-St-Zip: ENKA, NC 28728

Title: D ( ) Delete
Name: GOODWYN, WILL
Address: 4600 EAST LAKE BLVD
City-St-Zip: BIRMINGHAM, AL 35217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: COB (X) Change ( ) Addition
Name: PALERMO, JOHN
Address: ONE EXECUTIVE DRIVE
City-St-Zip: BEDFORD, NH 03110

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CHARLES CAPPS VPF 03/02/2009

Electronic Signature of Signing Officer or Director — Date