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FILED
Jan 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P26844** **(1)**

1. Corporation Name
DART CONTAINER CORPORATION OF CALIFORNIA

Principal Place of Business	Mailing Address
500 HOGSBACK ROAD MASON MI 48854	500 HOGSBACK ROAD MASON MI 48854

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/06/1989

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 48854-9547 / Country 30

4. FEI Number: 38-2592818 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DART, WILLIAM A
1952 FIELD ROAD
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C	☐ DELETE	1.1 TITLE	CD	☒ Change ☐ Addition
NAME	DART, WILLIAM A		1.2 NAME		
STREET ADDRESS	1952 FIELD ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	34231	
TITLE	VD	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	DART, ROBERT C		2.2 NAME		
STREET ADDRESS	GARRETTS LANE CRADLEY HEATH		2.3 STREET ADDRESS		
CITY-ST-ZIP	WARLEY W		2.4 CITY-ST-ZIP	WARLEY W. MIDLANDS, ENGLAND B64 5RE	
TITLE	SD	☒ DELETE	3.1 TITLE	S	☐ Change ☒ Addition
NAME	SCHWENDENER, BENJAMIN O.		3.2 NAME	LAMMERS, JAMES D.	
STREET ADDRESS	4084 VANATTA ROAD		3.3 STREET ADDRESS	820 BEECH STREET	
CITY-ST-ZIP	OKEMOS MI		3.4 CITY-ST-ZIP	EAST LANSING, MI 48823-3502	
TITLE	T	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	MYERS, WILLIAM L.		4.2 NAME		
STREET ADDRESS	2509 WOODVIEW DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	LANSING MI		4.4 CITY-ST-ZIP	48911-1771	
TITLE	PD	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	DART, KENNETH B		5.2 NAME		
STREET ADDRESS	N SOUND ROAD P O BOX 31372 N/A		5.3 STREET ADDRESS		
CITY-ST-ZIP	GRAND CAYMAN CA		5.4 CITY-ST-ZIP	GRAND CAYMAN, CAYMAN ISL. BWI	
TITLE	D	☐ DELETE	6.1 TITLE		☒ Change ☐ Addition
NAME	DART, CLAIRE T.		6.2 NAME		
STREET ADDRESS	1952 FIELD RD		6.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		6.4 CITY-ST-ZIP	34231	

CR2E034 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____ William L. Myers 1/28/98 (517)676-3803