2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26844

FILED Mar 27, 2007 Secretary of State

Entity Name: DART CONTAINER CORPORATION OF CALIFORNIA

Current Principal Place of Business: New Principal Place of Business: 500 HOGSBACK ROAD MASON, MI 488549547 **Current Mailing Address: New Mailing Address:** 500 HOGSBACK ROAD MASON, MI 488549547 US FEI Number: 38-2592818 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DART, WILLIAM A 1952 FIELD ROAD SARASOTA, FL 34231 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DART, WILLIAM A Name: Name: 1952 FIELD ROAD Address: Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip: VD Title: Title: () Delete (X) Change () Addition DART, ROBERT C Name: Name: DART, ROBERT C WINWARD 3, REGATTA OFF., PO BOX 31363 SMB WINWARD 3, REGATTA OFF., PO BOX 31363 Address: Address: GRAND CAYMAN, CI B.W.I, BW CI GRAND CAYMAN KY1-1206, BW CI City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition LAMMERS, JAMES D Name: Name: 500 HOGSBACK RD. Address: Address: City-St-Zip: MASON, MI 488549547 City-St-Zip: Title: () Delete Title: (X) Change () Addition MYERS, WILLIAM L FOX, KEVIN M Name: Name: Address: 500 HOGABACK RD Address: 500 HOGSBACK RD City-St-Zip: MASON, MI 488549547 City-St-Zip: MASON, MI 488549547 Title: PD Title: (X) Change () Addition () Delete DART, KENNETH B DART, KENNETH B Name: Name: WINWARD 3. REGATTA OFF., PO BOX 31372 SMB Address: WINWARD 3. REGATTA OFF., PO BOX 31372 Address: City-St-Zip: GRAND CAYMAN, CI B.W.I., BW CI City-St-Zip: GRAND CAYMAN KY1-1206, BW CI Title: () Delete Title: () Change () Addition DART, CLAIRE T Name: Name: Address: 1952 FIELD RD Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34231 I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119,

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: JAMES D. LAMMERS

S 03/27/2007

Florida Statutés. 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

Electronic Signature of Signing Officer or Director

Date