

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 804541

FILED  
Mar 13, 2012  
Secretary of State

**Entity Name:** ELBERTA CRATE & BOX CO.

**Current Principal Place of Business:**

606 DOTHAN HWY  
BAINBRIDGE, GA 39817

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 760  
BAINBRIDGE, GA 39818

**New Mailing Address:**

**FEI Number:** 58-0232440      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, STEPHEN R  
2991 GOLDEN EAGLE DR. E.  
TALLAHASSEE, FL 32312 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SIMMONS, D.R.JR.  
Address: 606 DOTHAN HWY.  
City-St-Zip: BAINBRIDGE, GA 39817

Title: D  
Name: MILLS, MICHAEL T.  
Address: 606 DOTHAN HWY.  
City-St-Zip: BAINBRIDGE, GA 39817

Title: D  
Name: SIMMONS, JOHN M.  
Address: 606 DOTHAN HWY.  
City-St-Zip: BAINBRIDGE, GA 39817

Title: SD  
Name: SIMMONS, D.R.,III  
Address: 606 DOTHAN HWY  
City-St-Zip: BAINBRIDGE, GA 39817

Title: CFO  
Name: WILLIAMS, STEPHEN R.  
Address: 606 DOTHAN HWY  
City-St-Zip: BAINBRIDGE, GA 39817

Title: PD  
Name: SIMMONS, THOMAS S PRES  
Address: 606 DOTHAN HWY  
City-St-Zip: BAINBRIDGE, GA 39817

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN R. WILLIAMS

CFO

03/13/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date