

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90171 007 ****50.00

DOCUMENT # M99000000986

1. Entity Name
REID PLASTICS GROUP LLC

| | |
|--|--|
| Principal Place of Business 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 | Mailing Address 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 |
|--|--|

| | |
|--|--|
| 2. Principal Place of Business 3101 TOWERCREEK PKWY Suite, Apt. #, etc. | 3. Mailing Address 10861 Mill Valley Rd Suite, Apt. #, etc. |
| City & State Atlanta GA | City & State OMAHA Ne |
| Zip 30339 | Country USA |
| Zip 68154 | Country |



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name
CT CORPORATION SYSTEMS

Street Address (P.O. Box Number is Not Acceptable)
1200 S. PINE ISLAND Rd

City
PLANTATION **FL** Zip Code
33324

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR SILVER, STEVE <input checked="" type="checkbox"/> Delete 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR JUSTICE, RONALD'E <input checked="" type="checkbox"/> Delete 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR BRASHER, TIMOTHY <input checked="" type="checkbox"/> Delete 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR ESTES, WILLIAM J <input type="checkbox"/> Delete 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CARTER, HENRY <input type="checkbox"/> Delete 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |

| 10. ADDITIONS/CHANGES | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SEE ATTACHED |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SEE ATTACHED |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* **CRISIS NOT REQUIRED** **KRIS K. LINDGREN** 4/18/02 (402) 934-2400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (9/01)

LIST OF OFFICERS
REID PLASTICS GROUP LLC
FED # 75-2825339

Attachment
919241

#M99006000986

| NAME | TITLE | ADDRESS |
|----------------|-------------------------|---|
| CARTER, HENRY | EXEC. VP OF SALES & MKG | 2604 NOTRE DAME PLANO, TX 75093 |
| STULMAN, DAVID | VP OF HUMAN RESOURCES | 4 CROWNWOOD COURT DALLAS, TX 75225 |
| LINDGREN, KRIS | CONTROLLER | 16615 CAPITOL PLZ #4 OMAHA, NE 68118 |