

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 Mailing Address
5605 N. MCARTHUR BLVD., SUITE 360 **5605 N. MCARTHUR BLVD., SUITE 360**
IRVING TX 75038 **IRVING TX 75038**

2. Principal Place of Business 3. Mailing Address
3101 TOWERCREEK PKWY **10861 Mill Valley Rd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Atlanta GA **OMAHA Ne**
 Zip Country Zip Country
30339 USA **68154**

4. FEI Number Applied For
75-2825339 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required



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** State **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