## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P00751 1. Corporation Name

**SEALED AIR CORPORATION (US)** 

Principal Place of Business Mailing Address					1 100 1100 I II I I I I I I I I I I I I	
PARK 80 PLAZA EAST SADDLE BROOK NJ 07663 PARK 80 PLAZA EAST SADDLE BROOK NJ 07663					DO NOT WRITE IN THIS SPACE	
U\$ U\$					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed 01/30/1984	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21	<u></u>	26			22-1682767 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		Suite, Apt. #, etc.			5. Certifcate of Status Desired   \$8.75 Additional Fee Required	
City & State	•	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
Zip	Country 25	Zip 30	Country		8. This corporation owes the current year Intangible Personal Property Tax.	
	9. Name and Address of Current				10. Name and Address of New Registered Agent	
			81	Name		
CORPORATION SERVICE COMPANY			82	Stroot Ad	dress (P.O. Box Number is Not Acceptable)	
1201 HAYS STREET			02	Oli Cot Au	dicas (F.S. Box Hallison in Harrison in Ha	
TALLAHASSEE FL 32301			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						
	Signature, system of prince to the contract of			istered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	C		1.1 TITLE		Vice President and Director Change Middition	
NAME	DUNPHY T.J. DERMOT	<b>4</b>	1.2 NAME		Horst Tabbe 15 Mortimer Drive	
STREET ADDRESS	P. O. BOX 669 N/A		1.3 STREET	ADDRESS	15 Mortiner Drive	
CITY-ST-ZIP	FAR HILLS NJ		1.4 CITY-S		old Greenwich, CT 06780	
TITLE	GCS		2.1 TITLE		Vice President and Secretary Change MAddition	
NAME	GRACE, ROBERT M. JR		2.2 NAME	ر ا	H. Katherine White 345 Shunpike Road	
STREET ADDRESS	34 FOREST AVENUE	ŧ	2.3 STREET	ADDRESS	345 Shunpike Road	
CITY-ST-ZIP	GLEN RIDGE NJ		2. 4 CITY-S		Chatham NJ07928	
TITLE	С	☐ DELETE	3.1 TITLE		Vice President Change Addition	
NAME	WARREN, JEFFREY S.		3 2 NAME	<b>1</b>	Robert A. Pesci windy woods Circle	
STREET ADDRESS	801 MINOGUE TERRACE		3.3 STREET			
CITY-ST-ZIP	PARAMUS NJ 07652		3.4. CITY-S	T-ZIP	NewTown, CT 06470	
TITLE	P		41 TITLE		☐ Change ☐ Addition	
NAME	HICKEY, WILLIAM V.		4.2 NAME			
STREET ADDRESS	745 CAYUGA LANE		4.3 STREET			
CITY-ST-ZIP	FRANKLIN LAKES NJ	- Vocation	4.4 CITY-S	r-ZIP	☐ Change ☐ Addition	
TITLE	VP		5.1 TITLE 5.2 NAME		☐ Change ☐ Addition	
NAME	BIXBY, JAMES A.		J.Z MAME			

WILTON CT CITY-ST-ZIP 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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

106 WALNUT TREE HILL

CRUIKSHANK, BRUCE A.

16 MUSKET RIDGE ROAD

**NEWTOWN CT** 

SVP

DELETE

1/8/99

☐ Change

☐ Addition