2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2009
Secretary of State

DOCUMENT# M88161

Entity Name: ACCURATE PAPER RECYCLING, INC.

Current Principal Place of Business:

5500 EAST GIDDENS AVE.
TAMPA, FL 336105307

New Principal Place of Business:

Current Mailing Address:

5500 EAST GIDDENS AVE.
TAMPA, FL 336105307

New Mailing Address:

FEI Number: 59-2897582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARDNER, DOUGLAS S JR.
5500 EAST GIDDENS AVE.
TAMPA, FL 336105307 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GARDNER, DOUGLAS S JR.
Address: 8487 TALLAHASSEE DR. N.E.
City-St-Zip: ST PETERSBURG, FL 33702

Title: ST ( ) Delete
Name: GARDNER, DOUGLAS S JR.
Address: 5500 EAST GIDDENS AVE.
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete
Name: BOWERS, SUSAN G
Address: 5500 EAST GIDDENS AVE.
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete
Name: MAYHEW, MOLLIE G
Address: 5500 EAST GIDDENS AVE.
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete
Name: HERNANDEZ, MICHAEL
Address: 5237 RIVA RIDGE DR.
City-St-Zip: WESLEY CHAPEL, FL 33544

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. 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 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: DOUGLAS S GARDNER JR. PRES 03/06/2009

Electronic Signature of Signing Officer or Director — Date