

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 386202

FILED
Jan 30, 2014
Secretary of State
CC7792241123

Entity Name: MAC PAPER CONVERTERS, INC.

Current Principal Place of Business:

3300 PHILIPS HIGHWAY
JACKSONVILLE, FL 32207

Current Mailing Address:

POST OFFICE BOX 5369
JACKSONVILLE, FL 32247-5369 US

FEI Number: 59-1375158

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGEHEE, DAVID S
3300 PHILIPS HWY
JACKSONVILLE, FL 32207 US

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

Officer/Director Detail :

Title PD
Name MCGEHEE, SUTTON
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title TAS
Name ROGERS, JONATHAN Y.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title CEO
Name MCGEHEE, DAVID S.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title SVD
Name MCGEHEE, THOMAS R. JR.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title VP
Name BABBIT, DARNELL M.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title VP
Name TEES, ROBERT
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name MCGEHEE, DELIA H. II
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name MCGEHEE, ANN W.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

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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: JONATHAN Y. ROGERS

TAS

01/30/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name MCGEHEE, TERRI R.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name MCGEHEE, DEBORAH D.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name RILEY, ANN M.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207

Title D
Name MCGEHEE, KATHRYN N.
Address 3300 PHILIPS HIGHWAY
City-State-Zip: JACKSONVILLE FL 32207