

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 285906

FILED
Feb 03, 2012
Secretary of State

Entity Name: MAC PAPERS, INC.

Current Principal Place of Business:

3300 PHILIPS HIGHWAY
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 5369
JACKSONVILLE, FL 322475369 US

New Mailing Address:

FEI Number: 59-1059698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGEHEE, SUTTON
3300 PHILIPS HWY
JACKSONVILLE, FL 32207 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

OFFICERS AND DIRECTORS:

Title: TAS
Name: ROGERS, JONATHAN Y
Address: 3300 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: CEO
Name: MCGEHEE, SUTTON
Address: 3300 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: VSD
Name: MCGEHEE, THOMAS R JR.
Address: 3300 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: PD
Name: MCGEHEE, DAVID S
Address: 3300 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP
Name: BABBIT, DARNELL M
Address: 3300 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP
Name: COLLINS, STEPHEN L
Address: 3300 PHILIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

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

02/03/2012

Electronic Signature of Signing Officer or Director

Date

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2012

UNIFORM BUSINESS REPORT

ADDITIONAL OFFICERS AND DIRECTORS:

TITLE: VP
NAME: STEVE BETHEA
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: VP
NAME: DAVID MILLEMAN
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: VP
NAME: HARVEY REID
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: VP
NAME: THOMAS A. FLEMING
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: VP
NAME: DAVID G. BOWERS, JR.
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: VP
NAME: KENNETH R. VONTZ
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: D
NAME: ANN W. McGEHEE
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: D
NAME: DELIA H. McGEHEE, II
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207

TITLE: D
NAME: ANN M. RILEY
ADDRESS: 3300 PHILIPS HIGHWAY
CITY, STATE JACKSONVILLE, FL. 32207