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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN - 1 PM 12:03

DOCUMENT # 524136

(9)

1. Corporation Name

SUN PAPER AND PLASTICS, INC.

Principal Place of Business

Mailing Address

193 STATE ROAD 16
ST. AUGUSTINE FL 32085

193 STATE ROAD 16
ST. AUGUSTINE FL 32085

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/20/1977

3a. Date of Last Report

05/01/1994

4. FEI Number

59-1710850

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 193 SR 16

26 193 SR 16

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 ST. AUGUSTINE FL

28 ST. AUGUSTINE FL

24 Zip

Country

29 Zip

Country

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAYLOR, ROBERT R.
193 STATE ROAD 16
ST. AUGUSTINE FL 32084

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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 of Registered Agent (if not the same as the corporation's registered agent)

Signature of Registered Agent (if not the same as the corporation's registered agent)

1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. NAME

15. STREET ADDRESS

16. CITY, ST. ZIP

P
TAYLOR, ROBERT R.
193 STATE ROAD 16
ST. AUGUSTINE FL

17. NAME

18. NAME

19. STREET ADDRESS

20. CITY, ST. ZIP

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45. CITY, ST. ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or liquidator (as designated) to receive this report as required by Chapter 147, Florida Statutes, and that my name appears in Block 12 or 13 or 14 if changed, or on an attachment with an address.

SIGNATURE:

Robert R. Taylor
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR
ROBERT R. TAYLOR

5/21/95

904 P 29-3341