

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 809303

1. Entity Name

BRUNSWICK PULP & PAPER COMPANY

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90051 043 ***150.00

Principal Place of Business

Mailing Address

133 PEACHTREE STREET NE
P.O. BOX 105605
ATLANTA GA 30348-2605

133 PEACHTREE STREET NE
P.O. BOX 105605
ATLANTA GA 30348-5605

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-0175120

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE AS
NAME ROUNTREE, KIMBERLY D
STREET ADDRESS 133 PEACHTREE STREET NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME JONES, W. WESLEY
STREET ADDRESS 133 PEACHTREE STREET NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE SVP
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE P
NAME KENNEDY, CLINT M.
STREET ADDRESS 133 PEACHTREE STREET NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME KHOURY, KENNETH F.
STREET ADDRESS 133 PEACHTREE STREET NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME CORRELL, A.D.
STREET ADDRESS 133 PEACHTREE STREET NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MCGOVERN, JOHN F
STREET ADDRESS 133 PEACHTREE ST, N.E.
CITY-ST-ZIP ATLANTA GA ☒ Delete

TITLE D/EVP/CFO
NAME DANNY W. HUFF
STREET ADDRESS 133 PEACHTREE ST., NE.E
CITY-ST-ZIP ATLANTA, GA 30303 ☒ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Kimberly Dyslin Rountree, Assistant Secretary

Date

2-21-00 404/652-4000

Daytime Phone #

CR2E034 (9/99)