

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 816530

1. Entity Name

GEORGIA-PACIFIC INVESTMENT COMPANY

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90097 049 ***150.00

Principal Place of Business

Mailing Address

133 PEACHTREE ST NE
P O BOX 105605
ATLANTA GA 30303-1812

133 PEACHTREE ST NE
P O BOX 105605
ATLANTA GA 30303-1808

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

93-6028874

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 ST NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE VP/T
NAME Phillip M. Johnson
STREET ADDRESS 133 Peachtree St, NE
CITY-ST-ZIP Atlanta, GA 30303 ☐ Change ☒ Addition

TITLE D
NAME PAUL, RONALD L
STREET ADDRESS 133 PEACHTREE STREET NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

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

TITLE VP
NAME HUFF, DANNY W
STREET ADDRESS 133 PEACHTREE STREET NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE EVP/D
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

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

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

TITLE DP
NAME GLASS, DONALD L
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 ST NE
CITY-ST-ZIP ATLANTA GA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 an other like empowered.

SIGNATURE:

Kimberly Dyslin Rountree, Asst. Secretary

2-17-00

404/652-4000

Date

Daytime Phone #

CR2E034 (9/99)