

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 818114

FILED
Jan 19, 2011
Secretary of State

Entity Name: SONOCO PRODUCTS COMPANY

Current Principal Place of Business:

NORTH SECOND STREET
HARTSVILLE, SC 29550

New Principal Place of Business:

ONE NORTH SECOND STREET
HARTSVILLE, SC 29550

Current Mailing Address:

PO BOX 160 MS B04
HARTSVILLE, SC 29551

New Mailing Address:

FEI Number: 57-0248420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: PRES
Name: DELOACH, HARRIS E
Address: ONE NORTH SECOND ST
City-St-Zip: HARTSVILLE, SC 29550 US

Title: CFO
Name: HUPFER, CHARLES J
Address: 912 W HOME AVE
City-St-Zip: HARTSVILLE, SC

Title: AS
Name: KREMER, ELIZABETH R
Address: ONE NORTH SECOND STREET
City-St-Zip: HARTSVILLE, SC 29550

Title: TREA
Name: BOND, RITCHIE L
Address: ONE NORTH SECOND STREET
City-St-Zip: HARTSVILLE, SC 29550

Title: DIR
Name: MICALI, JAMES M
Address: ONE PARKWAY SOUTH
City-St-Zip: GREENVILLE, SC 29615

Title: DIR
Name: NEWTON, LLOYD W
Address: 6128 AUDUBON MANOR BLVD.
City-St-Zip: LITHIA, FL 33547

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: ELIZABETH R. KREMER

AS

01/19/2011

Electronic Signature of Signing Officer or Director

Date