

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 819928

FILED
Jan 08, 2004
Secretary of State

Entity Name: PAPER PRODUCTS COMPANY OF MOBILE, INC.

Current Principal Place of Business:

3440 ARMOUR AVENUE
P.O. BOX 7066
MOBILE, AL 36670

New Principal Place of Business:

Current Mailing Address:

3440 ARMOUR AVENUE
P.O. BOX 7066
MOBILE, AL 36670

New Mailing Address:

FEI Number: 63-0364286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MCRANEY, W.V., SR.,
Address: 3440 ARMOUR AVENUE
City-St-Zip: MOBILE, AL

Title: P () Delete
Name: MCRANEY, W.V., JR.,
Address: 3440 ARMOUR AVENUE
City-St-Zip: MOBILE, AL

Title: V () Delete
Name: MCRANEY, MICHAEL V.,
Address: 3440 ARMOUR AVENUE
City-St-Zip: MOBILE, AL

Title: D () Delete
Name: MCRANEY, DOROTHY A.,
Address: 3440 ARMOUR AVE.
City-St-Zip: MOBILE, AL

Title: V () Delete
Name: ESKRIDGE, JOHN
Address: 3440 ARMOUR AVE.
City-St-Zip: MOBILE, AL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOHN ESKRIDGE

Electronic Signature of Signing Officer or Director

VPGM

01/08/2004

_____ Date