FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 FEB 28 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **824307** **(3)**

1. Corporation Name
ROYAL CUP, INC.

Principal Place of Business	Mailing Address
1209 ORANGE STREET WILMINGTON DELAWARE 19801	1209 ORANGE STREET WILMINGTON DELAWARE 19801

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **04/01/1970**
3a. Date of Last Report: **02/28/1994**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number: **63-0281988** ☐ 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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	☐ Change ☐ Addition
NAME	SMITH JR,WILLIAM E	1.2 NAME	
STREET ADDRESS	3405 MONTEVALLO ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	BAGBY, LAMAR	2.2 NAME	
STREET ADDRESS	1236 S. COVE LN.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM, AL 00000	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	☒ Change ☐ Addition
NAME	WOLF,WILLIAM	3.2 NAME	no longer with company - Delete
STREET ADDRESS	3334 COUNTY ROAD 42W	3.3 STREET ADDRESS	
CITY-ST-ZIP	JEMISON AL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	JACKSON,IVEY	4.2 NAME	
STREET ADDRESS	ONE INDEPENDENCE PLAZA, SUITE 400	4.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM AL	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	LEWIS, EUGENE	5.2 NAME	
STREET ADDRESS	34 CLARENDON RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM, AL 00000	5.4 CITY-ST-ZIP	
TITLE	P	6.1 TITLE	☐ Change ☐ Addition
NAME	SMITH, HATTON	6.2 NAME	
STREET ADDRESS	3300 CHEROKEE RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	BIRMINGHAM, AL 00000	6.4 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(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 2/10/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CP