

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842889

FILED  
Apr 08, 2005  
Secretary of State

Entity Name: SP RECYCLING CORPORATION

## Current Principal Place of Business:

1895 PHOENIX BLVD  
STE 400  
ATLANTA, GA 30349 US

## New Principal Place of Business:

## Current Mailing Address:

1895 PHOENIX BLVD  
STE 400  
ATLANTA, GA 30349 US

## New Mailing Address:

709 PAPERMILL RD  
ATTN: ACCOUNTING DEPARTMENT  
DUBLIN, GA 31027 US

FEI Number: 58-1312936

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: D ( ) Delete  
Name: GORMAN, JOSEPH R  
Address: 1895 PHOENIX BLVD. STE 400  
City-St-Zip: ATLANTA, GA 30349

Title: PD ( ) Delete  
Name: HAHN, THOMAS M  
Address: 1895 PHOENIX BLVD. STE 400  
City-St-Zip: ATLANTA, GA 30349

Title: S ( ) Delete  
Name: GIDDENS, GLENN C  
Address: 1895 PHOENIX BLVD, STE 400  
City-St-Zip: ATLANTA, GA 30349

Title: T ( ) Delete  
Name: CARTER, MARK O  
Address: 1895 PHOENIX BLVD, STE 400  
City-St-Zip: ATLANTA, GA 30349

## 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:

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: C. GLENN GIDDENS

S

04/08/2005

Electronic Signature of Signing Officer or Director

Date