

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851966

FILED
Apr 25, 2011
Secretary of State

Entity Name: APPLETON PAPERS INC.

Current Principal Place of Business:

825 EAST WISCONSIN AVENUE
APPLETON, WI 54912

New Principal Place of Business:

825 EAST WISCONSIN AVENUE
APPLETON, WI 54911 US

Current Mailing Address:

PO BOX 1872
APPLETON, WI 54912 US

New Mailing Address:

FEI Number: 36-2556469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: VP
Name: FERREE, THOMAS J
Address: 825 E WISCONSIN AVENUE
City-St-Zip: APPLETON, WI 54912 US

Title: SEC
Name: VAN STRATEN, TAMI L
Address: 825 E WISCONSIN AVE.
City-St-Zip: APPLETON, WI 54912 US

Title: PRES
Name: RICHARDS, MARK R
Address: 825 E. WISCONSIN AVE.
City-St-Zip: APPLETON, WI 54912 US

Title: AS
Name: BARKER, PAMELA
Address: 825 E WISCONSIN AVE.
City-St-Zip: APPLETON, WI 54912 US

Title: AS
Name: MIELIULIS, BEN
Address: 825 E WISCONSIN AVE.
City-St-Zip: APPLETON, WI 54912 US

Title: AT
Name: FLETCHER, JEFFREY J
Address: 825 EAST WISCONSIN AVE.
City-St-Zip: APPLETON, WI 54912 US

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: JEFFREY J. FLETCHER

AT

04/25/2011

Electronic Signature of Signing Officer or Director

Date