

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90342 019 ***150.00

DOCUMENT # F01000003104

1. Entity Name
**REXAM INTELLECTUAL PROPERTY HOLDINGS
COMPANY**



Principal Place of Business
**4201 CONGRESS STREET
SUITE 340
CHARLOTTE, NC 28209**

Mailing Address
**4201 CONGRESS STREET
SUITE 340
CHARLOTTE, NC 28209**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03312006

Chg-P

CR2E034 (11/05)

4. FEI Number

51-0391997

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VPAS	<input checked="" type="checkbox"/> Delete
NAME	SIMMONS, BRIAN	
STREET ADDRESS	10 SOUTH WACKER DRIVE, SUITE 3175	
CITY-ST-ZIP	CHICAGO, IL 60606	
TITLE	CEOP	<input checked="" type="checkbox"/> Delete
NAME	WEEKS, JOHN R	
STREET ADDRESS	501 MOSSIDE BLVD.	
CITY-ST-ZIP	NORTH VERSAILLES, PA 15137	
TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	FARRELL, MICHAEL	
STREET ADDRESS	501 MOSSIDE BLVD.	
CITY-ST-ZIP	NORTH VERSAILLES, PA 15137	
TITLE	CFO	<input checked="" type="checkbox"/> Delete
NAME	CONLEY, GREGORY R	
STREET ADDRESS	501 MOSSIDE BLVD.	
CITY-ST-ZIP	NORTH VERSAILLES, PA 15137	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Frank C. Brown	
STREET ADDRESS	4201 Congress St, Suite 340	
CITY-ST-ZIP	Charlotte NC 28209	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ronald H. Glasshoff	
STREET ADDRESS	4201 Congress St, Suite 340	
CITY-ST-ZIP	Charlotte NC 28209	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Clinton H. Tumlin	
STREET ADDRESS	4201 Congress St, Suite 340	
CITY-ST-ZIP	Charlotte NC 28209	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lisa R. Hysko	
STREET ADDRESS	4201 Congress St, Suite 340	
CITY-ST-ZIP	Charlotte NC 28209	
TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Peggy Harrington	
STREET ADDRESS	4201 Congress St, Suite 340	
CITY-ST-ZIP	Charlotte NC 28209	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank C. Brown

Date

4/6/2006

Daytime Phone #

704/591-1500