2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000003137

1. Entity Name

SIGNATURE:



FILED Apr 12, 2006 8:00 am Secretary of State

04-12-2006 90094 049 ***158.75

04-06-06

918 825-0616

Daytime Phone #

ORCHIDS PAPER PRODUCTS COMPANY													
Principal Place of Business M.A.I.P. 4826 HUNT STREET PRYER, OK 74361				Mailing Address M.A.I.P. 4826 HUNT STREET PRYER, OK 74361					III Baibo iiia bo ii b	. 	 	 	
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				04052006	Chg-P	c	R2E034 (11/	05)	
City & Stat PRYOR	OR, OK 74361			City & State PRYOR, OK 74361				4. FEI Num 23-29	ber 56944		-	+	olied For Applicable
Zip	Country			Zip	ntry	5. Certificate of S						8.75 Additional se Required	
- A 1	6. Name	and Address of Cui	rent Regis	stered Agent	1			7. Name a	d Address of N	lew Regis	tered Agent		
						Name							
FROOK, D 17315 EQU ODESSA,			Street Ac	ldress (F	P.O. Box Num	ber is Not Acce	ptable)						
					City	City FL Zip Code							
8. The above the obligat	named entitions of regis	y submits this statemi tered agent.	ent for the p	ourpose of changing it	ts register	ed office or	register	ed agent, or b	oth, in the State	of Florida.	. I am familiar v	with, a	and accept
SIGNATURE_		FROOK 4	ageni and litle	if applicable. (NC	TE: Registere	nd Agent signatur	re raquired	when reinstating)			4-6-06 DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.								00 May Be ed to Fees					
10.	OFFICERS AND			DIRECTORS 11.				ADDITION	S/CHANGES TO	OFFICER	S AND DIRECT	TORS	IN 11
TITLE	СР			☐ Delete 117		E					□ Chai	nge	Addition
NAME	SAGE, MICHAEL					E					^		
STREET ADDRESS CITY-ST-ZIP	ROUTE 3 BOX 69-8 PRYER, OK 74361					EFF ADDRESS '+ST-ZIP	482	6 HUNT	STREET				
TITLE	S	. ,		☐ Defete	TITLI	E	1 13.1	OK, OK	7-701		∠ Chai	nae	☐ Addition
NAME	SCHROE	DER, KEITH			NAM	IE .		_				- 9-	
STREET ADDRESS	RT. 3 BOX 69-8					ET ADDRESS		6 HUNT					
CITY-ST-ZIP	PRYER, OK 74361			· · · · · · · · · · · · · · · · · · ·		-ST-ZIP	PRY	OR, OK	74361				
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NAME				LT Delete	NAM						☐ cusi	ige	Addition
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CITY-ST-ZIP					CITY	-ST-ZIP							
Indicated	on this repo	rt or supplemental rep	oort is true a	iling does not qualify and accurate and that d to execute this repoil other ske en powered	my signal	ture shall ha	ive the s	ame legal eff	ect as if made u	nder oath:	that I am an off	ficer o	or director L
unanged,	or on an atta	actiment with an adm	ess yıın a	cruetake eutoometer	J.								1

KEITH R SCHROEDER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR