

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000824

FILED  
Apr 11, 2011  
Secretary of State

Entity Name: EASTWOODS PACKAGING CORPORATION

**Current Principal Place of Business:**

11054 BRIDGE HOUSE RD  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1875  
WINDERMERE, FL 347861875 US

**New Mailing Address:**

FEI Number: 11-3140602      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PRESTIPINO, GINA M  
11054 BRIDGE HOUSE RD  
WINDERMERE, FL 34786 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: CP  
Name: PRESTIPINO, NATALIE L  
Address: 11054 BRIDGE HOUSE RD  
City-St-Zip: WINDERMERE, FL 34786

Title: DT  
Name: PRESTIPINO, FRANK C SR  
Address: 11054 BRIDGE HOUSE RD  
City-St-Zip: WINDERMERE, FL 34786

Title: DVP  
Name: PRESTIPINO, FRANK C JR  
Address: 11054 BRIDGE HOUSE RD  
City-St-Zip: WINDERMERE, FL 34786

Title: S  
Name: PRESTIPINO, GINA M  
Address: 11054 BRIDGE HOUSE RD  
City-St-Zip: WINDERMERE, FL 34786

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: FRANK C. PRESTIPINO, SR

DT

04/11/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date