

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006384

FILED
May 01, 2009
Secretary of State

Entity Name: EXOPACK HOLDING CORP.

Current Principal Place of Business:

3070 SOUTHPORT RD
SPARTANBURG, SC 29302

New Principal Place of Business:

Current Mailing Address:

3070 SOUTHPORT RD
SPARTANBURG, SC 29302

New Mailing Address:

FEI Number: 76-0678893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: ALGER, MICHAEL
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: FINNEGAN, DAVID
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: DP () Delete
Name: KNOTT, JACK
Address: 3070 SOUTHPORT RD
City-St-Zip: SPARTANBURG, SC 29302

Title: TV () Delete
Name: HEARD, JON
Address: 3070 SOUTHPORT RD
City-St-Zip: SPARTANBURG, SC 29302

Title: D () Delete
Name: CALHOUN, KEVIN
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALGER, MICHAEL
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: D (X) Change () Addition
Name: TERRY, CLARENCE E
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BRODY, MARK
Address: 5200 TOWN CENTER CIRCLE, SUITE 470
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JON HEARD

TV

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date