

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006950

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: ORACAL USA, INC.

## Current Principal Place of Business:

501 RIVERSIDE AVENUE  
SUITE 500  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

1100 ORACAL PARKWAY  
BLACK CREEK, GA 31308

## Current Mailing Address:

501 RIVERSIDE AVENUE  
SUITE 500  
JACKSONVILLE, FL 32202

## New Mailing Address:

1100 ORACAL PARKWAY  
BLACK CREEK, GA 31308

FEI Number: 35-2237537

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: LOCLAIR, HOLGER  
Address: ORAFOL EUROPE GMBH AM BIOTOP 2  
City-St-Zip: 16515 ORANIENBURG GERMANY,

Title: AS ( ) Delete  
Name: GORNALL, JOHN L JR.  
Address: 171 17TH STREET NW, SUITE 2100  
City-St-Zip: ATLANTA, GA 30363

Title: PST ( ) Delete  
Name: MERTZ, RANDALL  
Address: 1100 ORACAL PARKWAY  
City-St-Zip: BLACK CREEK, GA 31308

Title: D ( ) Delete  
Name: LOCLAIR, HOLGER  
Address: AM BIOTOP 2  
City-St-Zip: 16515 ORANIENBURG, GERMANY, XX

Title: D ( ) Delete  
Name: SCHMIDBAUR, KLAUS  
Address: AM BIOTOP 2  
City-St-Zip: 16515 ORANIENBURG, GERMANY, XX

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: RANDALL MERTZ

PST

01/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date