


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90745 032 \*\*\*150.00

<b>DOCUMENT # F94000002897</b>	
<b>1. Entity Name</b> RIVERWOOD INTERNATIONAL MACHINERY, INC.	

<b>Principal Place of Business</b> 3350 RIVERWOOD PKWY SUITE 1400 ATLANTA, GA 30339 US	<b>Mailing Address</b> 3350 RIVERWOOD PKWY SUITE 1400 ATLANTA, GA 30339 US
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<b>2. Principal Place of Business</b> 814 Livingston Court Suite, Apt. #, etc.	<b>3. Mailing Address</b> 814 Livingston Court Suite, Apt. #, etc.
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04222004 Chg-P CR2E034 (10/03)

<b>City &amp; State</b> Marietta GA	<b>City &amp; State</b> Marietta GA
<b>Zip</b> 30067	<b>Zip</b> 30067
<b>Country</b> US	<b>Country</b> US

<b>4. FEI Number</b> 58-2111645	<b>Applied For</b> Not Applicable
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<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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<b>6. Name and Address of Current Registered Agent</b> THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> HUMPHREY, STEPHEN M 3350 RIVERWOOD PKWY SE 1400 ATLANTA, GA 30339 <input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 814 Livingston Court Marietta GA 30067
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP</b> DAMPIER, LAWRENCE C 3350 RIVERWOOD PKWY SE #1400 ATLANTA, GA 30339 <input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 814 Livingston Court Marietta GA 30067
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>VT</b> GUZMAN, ANDRE R 3350 RIVERWOOD PKWY SE #1400 ATLANTA, GA 30339 <input checked="" type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP & Treasurer W. Scott Wenholt 814 Livingston Court Marietta GA 30067
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> STROETZ, EDWARD W 3350 RIVERWOOD PKWY 1400 ATLANTA, GA 30339 <input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 814 Livingston Court Marietta GA 30067
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** Steven J. Myers **Steven J. Myers** 4-23-04 770-644-3077  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #