


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90234 033 ***150.00

DOCUMENT # F99000002544			
1. Entity Name SCA PACKAGING NORTH AMERICA, INC.			
Principal Place of Business 800 FIFTH AVE. NEW BRIGHTON, PA 15066		Mailing Address 500 BALDWIN TOWER EDDYSTONE, PA 19022	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>800 FIFTH AVENUE</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>NEW BRIGHTON, PA</i>	
Zip	Country	Zip <i>15066</i>	Country
04102007		Chg-P	CR2E034 (12/06)
4. FEI Number 25-1119372		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		FL	Zip Code
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, THOMAS 2929 ARCH ST PHILADELPHIA, PA 19104 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREW MALLEOD 1401 PLEASANT ST DEKALB, IL 60115 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO LEACH, RON 800 FIFTH AVENUE NEW BRIGHTON, PA 15066 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/PRESIDENT LEACH, RONALD 1401 PLEASANT ST DEKALB, IL 60115 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO KELLY, WILLIAM 1401 PLEASANT ST DEKALB, IL 60115 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR KELLY, WILLIAM 1401 PLEASANT ST DEKALB, IL 60115 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GORMAN, KEVIN S 101 MAPLE AVENUE WYNCOTE, PA 19095 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SIVATFOID JOHN RORPO 800 FIFTH AVENUE NEW BRIGHTON, PA 15066 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOTT, JEFFREY 2929 ARCH ST PHILADELPHIA, PA 19104 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RICK FOLTZ 800 FIFTH AVENUE NEW BRIGHTON, PA 15064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS VENSSORN, BAER 2929 ARCH ST PHILADELPHIA, PA 19104 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PHILIP AMBERG 1401 PLEASANT ST DEKALB, IL 60115 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>John S. Gorman</i>		Date: <i>4/13/07</i>	Daytime Phone #: <i>724-843-8200</i>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>

ATTACHMENT

40084742

Florida Annual Report

F99000002544

Officers and Directors (Cont'd)

2007

Officers

Eric Sprys

Asst Sec 800 Fifth Ave., New Brighton, PA 15066