

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2008 8:00 am
Secretary of State

04-15-2008 90019 021 ***158.75

DOCUMENT # G95271 1. Entity Name PACKAGE MATERIAL SALES, INC.	
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Principal Place of Business 4408 N 56TH ST TAMPA, FL 33610-4120	Mailing Address 4408 N 56TH ST TAMPA, FL 33610-4120
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66009988



01072008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2401367	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent GOLD, RUSSELL D. 25430 OAKS BLVD LAND O' LAKES, FL 34639
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**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resubmitting)

**FILE NOW!!! FEB IS \$150.00
After May 1, 2008 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLD, SONORA E. 25430 OAKS BLVD LAND O' LAKES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLD, RUSSELL D. 25430 OAKS BLVD LAND O' LAKES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLD, KEITH D. 204 CLEARWATER DR. PONTE VEDRA BEACH, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLD, RONALD A. 24017 STARLING CIR LAND O' LAKES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLD, JOHN H 3019 RIDGEVALE CIRCLE VALRICO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 the empowered.

SIGNATURE: John H. Gold **5-6-08 622-7705**
Signatures AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #