

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H83303

1. Corporation Name
PANHANDLE PAPER COMPANY, INC.

Principal Place of Business
% FLETCHER J. HERNDON, JR.
807 JAMES LEE RD.
FT WALTON BEACH FL 32547-2221

Mailing Address
% FLETCHER J. HERNDON, JR.
807 JAMES LEE RD.
FT WALTON BEACH FL 32547-2221

FILED
Feb 18, 1999 8:00am
Secretary of State

02-18-1999 90124 009 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/29/1985

4. FEI Number

59-2619117

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERNDON, FLETCHER J., JR.
807-A JAMES LEE RD.
FT WALTON BEACH FL 32547

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	HERNDON, FLETCHER J., JR.	1.2 NAME	
STREET ADDRESS	1119 QUAIL CIRCLE	1.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL	1.4 CITY-ST-ZIP	
TITLE	DV	2.1 TITLE	
NAME	BACHELOR, DONALD O.	2.2 NAME	
STREET ADDRESS	807-A JAMES LEE RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT WALTON BEACH FL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	
NAME	BACHELOR, JR. DONALD O.	3.2 NAME	
STREET ADDRESS	413 SNAPPER DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	DESTIN FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Fletcher J. Herndon, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-99

Date

1-850-862-7746

Daytime Phone #

CR2E034 (11/98)