

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J88176

Entity Name: ST. PETE PAPER COMPANY

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

12995 AUTOMOBILE BLVD
CLEARWATER, FL 33762

New Principal Place of Business:

Current Mailing Address:

PO BOX 17207
CLEARWATER, FL 33762

New Mailing Address:

FEI Number: 59-2852027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, PEDRO J. SR
12995 AUTOMOBILE BLVD
CLEARWATER, FL 33762 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: DP () Delete
Name: GOMEZ, PEDRO J.
Address: 2105 HEMBURY PL
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VST () Delete
Name: GOMEZ, NORA
Address: 1205 MARION DR SOUTH
City-St-Zip: ST. PETERSBURG, FL 33707

Title: VD () Delete
Name: GOMEZ, PEDRO J.
Address: 44791 ST GERMAINE COURT
City-St-Zip: ASHBURN, VA 20147

Title: D () Delete
Name: GOMEZ, NORA
Address: 1205 MARION DR SOUTH
City-St-Zip: ST. PETERSBURG, FL 33707

Title: D () Delete
Name: GOMEZ, RITA
Address: 2105 HEMBURY PL
City-St-Zip: SUN CITY CENTER, FL 33573

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: NORA R GOMEZ

SECR

04/07/2009

Electronic Signature of Signing Officer or Director

Date