

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002295

FILED
Apr 09, 2008
Secretary of State

Entity Name: PAPER FIRST AFFILIATES, LLC

Current Principal Place of Business:

5950 HAZELTINE NATIONAL DRIVE
SUITE 255
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

5950 HAZELTINE NATIONAL DRIVE
SUITE 255
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 14-1806207 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SYKES, JERRY
Address: 76 FULLER ROAD
City-St-Zip: ALBANY, NY 12205

Title: MGR () Delete
Name: GREEN, STEVE
Address: 26 TARA DRIVE
City-St-Zip: PEMBROKE, MA 02359

Title: MGR () Delete
Name: PATEL, NEAL
Address: 47030 CONRAD ANDERSON DR.
City-St-Zip: HAMMOND, LA 70401

Title: MGR () Delete
Name: BANDY, PAM
Address: PO BOX 546
City-St-Zip: SALEM, IL 62881

Title: MGR () Delete
Name: LEVY, JERRY
Address: 7825 WINCHESTER RD., SUITE 114
City-St-Zip: MEMPHIS, TN 38125

Title: MGR () Delete
Name: SCHWARTZ, MIKE
Address: 4216 W. BELMONT
City-St-Zip: CHICAGO, IL 60641

ADDITIONS/CHANGES:

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: MGR (X) Change () Addition
Name: LEVY, JERRY
Address: 3650 NORTH GLOSTER STREET
City-St-Zip: TUPELO, MS 38804

Title: MGR (X) Change () Addition
Name: SCHWARTZ, CHUCK
Address: 1880 WEST FULLERTON
City-St-Zip: CHICAGO, IL 60614

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NORMA BALL

ED

04/09/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date