

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41313

FILED
Jan 09, 2011
Secretary of State

Entity Name: THE PAPER WORKER'S AID FUND, INC.

Current Principal Place of Business:

375 MUSCOGEE RD
CANTONMENT, FL 32533 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 87
CANTONMENT, FL 32533 US

New Mailing Address:

FEI Number: 59-1006158 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GREEN, R.M.
2957 CREIGHTON ROAD
PENSACOLA, FL 32504 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

OFFICERS AND DIRECTORS:

Title: T
Name: BURKETT, MARIA D
Address: 3221 N PINE BARREN RD
City-St-Zip: MCDAVID, FL 32568

Title: D
Name: COBURGER, MICHAEL C
Address: 1007 STILLBROOK RD
City-St-Zip: PENSACOLA, FL 32514

Title: D
Name: BOWMAN, CARL
Address: 5052 GUERNSEY RD
City-St-Zip: PACE, FL 32571

Title: PD
Name: GREEN, R.M.
Address: 2957 CREIGHTON BLVD
City-St-Zip: PENSACOLA, FL 32504

Title: S
Name: MITTEN, PATTY
Address: 6555 SUWANNEE RD
City-St-Zip: PENSACOLA, FL 32526

Title: D
Name: BROWN, NED ROGER
Address: 1421 ROLLING OAKS DR.
City-St-Zip: MOLINO, FL 32577

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DENISE BURKETT

T

01/09/2011

Electronic Signature of Signing Officer or Director

Date