

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000025048

FILED
Apr 29, 2003
Secretary of State

Entity Name: AQUAFIBER PACKAGING CORPORATION

Current Principal Place of Business:

1150 LOUISIANA AVE., SUITE 5C
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1150 LOUISIANA AVE., SUITE 5C
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3647964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAND, G. THOMAS JR.
2940 DEBROCY WAY
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

PALMER, HUGH M ATTORNE
1150 LOUISIANA AVE,
SUITE 6
WINTER PARK, FL 32789 US

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: HUGH M. PALMER

04/29/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BLAND, G. THOMAS JR.
Address: 2940 DEBROCY WAY
City-St-Zip: WINTER PARK, FL 32792

Title: VD () Delete
Name: JENSEN, KYLE R MR.
Address: 9442 BEAR LAKE ROAD
City-St-Zip: APOKA, FL 32703 US

Title: D () Delete
Name: OLSON, MARY S MS.
Address: 1150 LOUISIANA AVE., STE 5C
City-St-Zip: WINTER PARK, FL 32789 US

Title: D () Delete
Name: STONEROCK, ROBERT F JR.
Address: 1306 WOODLAND ST.
City-St-Zip: ORLANDO, FL 32806 US

Title: D () Delete
Name: BURNS, JOHN M MR.
Address: 205 ZEAGLER DR., STE 302
City-St-Zip: PALATKA, FL 32177 US

Title: D () Delete
Name: HARDY, JAMES E DDS
Address: 1150 LOUISIANA AVE., STE 5C
City-St-Zip: WINTER PARK, FL 32789 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: BLAND, G. THOMAS JR.
Address: 1150 LOUISIANA AVE., STE. 5C
City-St-Zip: WINTER PARK, FL 32789

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 for the exemption stated in Section 119.07(3)(i), 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: G. THOMAS BLAND, JR.

PD

04/29/2003

Electronic Signature of Signing Officer or Director

Date