2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005 8:00 am
Secretary of State
02-02-2005 90049 028 ***150.00

DOCUMENT # P02000019600

1. Entity Name
BRIGHT WHITE PAPER CO.

Principal Place of Business	Mailing Address
P.O. BOX 2472 PALM CITY, FL 34991	P.O. BOX 2472 PALM CITY, FL 34991

40011223

01172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0392368
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KAZDIN, SHARON J
~~2902 MAGNOLIA ROAD~~ 5258 SW ANHINGA AVE.
~~ORANGE PARK, FL 32073~~ PALM CITY, FL 34990

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Sharon J Kazdin President 01 25 05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V KAZDIN
NAME	~~KATBIN~~, RICHARD
STREET ADDRESS	~~2902 MAGNOLIA RD.~~ 5258 SW ANHINGA AVE
CITY-ST-ZIP	~~ORANGE PARK, FL 32065~~ PALM CITY, FL 34990
TITLE	P
NAME	KAZDIN, SHARON
STREET ADDRESS	~~2902 MAGNOLIA RD.~~ 5258 SW ANHINGA AVE
CITY-ST-ZIP	~~ORANGE PARK, FL 32065~~ PALM CITY, FL 34990
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sharon J Kazdin, President 01 25 05 772 223 5571
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #