

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P05995

1. Entity Name

FORT JAMES OPERATING COMPANY

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90010 041 ***150.00

Principal Place of Business

Mailing Address

C/O LEGAL DEPT.
 1650 LAKE COOK ROAD
 DEERFIELD IL 60015
 US

P. O. BOX 2218. LEGAL DEPT.
 RICHMOND VA 23218-2218
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

c/o Legal Department

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6802 Paragon Place

City & State

City & State

Richmond VA

4. FEI Number

54-1237819

Applied For

Not Applicable

Zip

Country

Zip

23230

Country

USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
 NAME HABERLI, ERNST A
 STREET ADDRESS 1650 LAKE COOK ROAD
 CITY-ST-ZIP DEERFIELD IL 60015

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VPSD ☐ Delete
 NAME CUTCHINS, CLIFFORD A IV
 STREET ADDRESS 1650 LAKE COOK ROAD
 CITY-ST-ZIP DEERFIELD IL 60015

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VP ☐ Delete
 NAME BUSH, T. NORMAN
 STREET ADDRESS 6802 PARAGON PLACE - STE 400
 CITY-ST-ZIP RICHMOND VA 23230

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 1650 Lake Cook Road
 CITY-ST-ZIP Deerfield IL 60015

TITLE SVPT ☐ Delete
 NAME LEMPKE, R. MICHAEL
 STREET ADDRESS 1650 LAKE COOK ROAD
 CITY-ST-ZIP DEERFIELD IL 60015

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE AS ☐ Delete
 NAME SELF, SUSAN O
 STREET ADDRESS 6802 PARAGON PL-STE 400
 CITY-ST-ZIP RICHMOND VA 23230

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SVPD ☐ Delete
 NAME GIRVAN, DANIEL J
 STREET ADDRESS 1650 LAKE COOK ROAD
 CITY-ST-ZIP DEERFIELD IL 60015

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan O. Self

REQUIRED Assistant Secretary

4/17/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Susan O, Self

Date

Daytime Phone #

CR2E034 (9/99)