FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jun 03, 2002 8:00 am **DOCUMENT #** P14309 Secretary of State 1. Entity Name 06-03-2002 91189 006 ***550.00 STONE CONTAINER CORPORATION Principal Place of Business Mailing Address TAX DEPARTMENT TAX DEPARTMENT 8182 MARYLAND AVE 8182 MARYLAND AVE ST LOUIS MD 63105 ST LOUIS MD 63105 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For MO mct.Louis 36-2041256 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE K - 62 62 22 **DCEO** ☐ Change ☐ Addition NAME NAME CURRAN, RAYMOND M STREET ADDRESS STREET ADDRESS 150 N. MICHIGAN AVENUE CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL TITLE ☐ Delete TITLE DVCF Change ☐ Addition Moore, Patrick J. NAME NAME MOORE, PATRICK J 8182 maryland Ave St Louis mo 6 STREET ADDRESS 150 N. MICHIGAN AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>CHICAGO IL</u> TITLE 297 ☐ Delete TITLE Change ☐ Addition NAME NAME ---HUNT, CRAIG A ---STREET ADDRESS STREET ADDRESS 150 N. MICHIGAN AVENUE CITY-ST-ZIP Chicago, IL 60601 CITY-ST-ZIP CHICAGO IL TITLE **VPT** ☐ Delete Change ☐ Addition Hinrichs, Charles A MAME HINRICHS, CHARLES A NAME STREET ADDRESS STREET ADDRESS 8182 mary land the 150 N. MICHIGAN AVENUE CITY-ST-ZIE CITY-ST-ZIP CHICAGO IL TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME KAUFMANN, PAUL STREET ADDRESS STREET ADDRESS 8182 MARYLAND AVE. CITY-ST-7IP CITY-ST-ZIP StLouis, MO 63105 SAINT LOUIS MO 63105 TITLE ☐ Delete TITLE ☐ Change Addition Marra, Richard P. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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