

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90745 031 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                         |                                                                                         |                                                                                                                                                                                                                                       |                                                                                                 |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # P35100</b><br>1. Entity Name<br><b>GRAPHIC PACKAGING INTERNATIONAL, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                         |                                                                                         |                                                                                                                                                                                                                                       |                                                                                                 |  |
| Principal Place of Business<br><b>3350 RIVERWOOD PKWY SE<br/>STE 1400<br/>ATLANTA, GA 30339 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                         |                                                                                         | Mailing Address<br><b>3350 RIVERWOOD PKWY SE<br/>STE 1400<br/>ATLANTA, GA 30339 US</b>                                                                                                                                                |                                                                                                 |  |
| 2. Principal Place of Business<br><b>814 Livingston Court</b><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                         | 3. Mailing Address<br><b>814 Livingston Court</b><br>Suite, Apt. #, etc.                |                                                                                                                                                                                                                                       |                                                                                                 |  |
| City & State<br><b>Marietta GA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                         | City & State<br><b>Marietta GA</b>                                                      |                                                                                                                                                                                                                                       | 4. FEI Number<br><b>84-0772929</b>                                                              |  |
| Zip<br><b>30067</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                         | Country<br><b>US</b>                                                                    |                                                                                                                                                                                                                                       | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |
| 6. Name and Address of Current Registered Agent<br><br><b>THE PRENTICE-HALL CORPORATION SYSTEM, INC.<br/>1201 HAYS STREET<br/>SUITE 105<br/>TALLAHASSEE, FL 32301</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                         |                                                                                         | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                                                                 |  |
| 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.<br>SIGNATURE: <u><i>Steven J. Myers</i></u> <b>VP Corporate Controller</b> <u>4-23-04</u><br><small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>                                                                                                                                                          |                                                                                                         |                                                                                         |                                                                                                                                                                                                                                       |                                                                                                 |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2004 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                         | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>        |                                                                                                                                                                                                                                       | <b>\$5.00 May Be Added to Fees</b>                                                              |  |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                         |                                                                                         | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                                 |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | P<br><b>HUMPHREY, STEPHEN M</b><br><b>3350 RIVERWOOD PKWY, S.W STE 1400</b><br><b>ATLANTA, GA 30329</b> | <input type="checkbox"/> Delete                                                         |                                                                                                                                                                                                                                       |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | CFO<br><b>BLOUNT, DANIEL</b><br><b>3350 RIVERWOOD PKWY, SE STE 1400</b><br><b>ATLANTA, GA 30339</b>     | <input checked="" type="checkbox"/> Delete                                              |                                                                                                                                                                                                                                       |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | VP<br><b>SAUCIER, STEVEN D</b><br><b>3350 RIVERWOOD PKWY SE STE. 1400</b><br><b>ATLANTA, GA 30339</b>   | <input type="checkbox"/> Delete                                                         |                                                                                                                                                                                                                                       |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | S<br><b>STROETZ, EDWARD W</b><br><b>3350 RIVERWOOD PKWY, SE STE. 1400</b><br><b>ATLANTA, GA 30339</b>   | <input type="checkbox"/> Delete                                                         |                                                                                                                                                                                                                                       |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TVP<br><b>GUZMAN, ANDRE R</b><br><b>3350 RIVERWOOD PKWY SE STE. 1400</b><br><b>ATLANTA, GA 30339</b>    | <input checked="" type="checkbox"/> Delete                                              |                                                                                                                                                                                                                                       |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | CFO<br><b>John T. Baldwin</b><br><b>814 Livingston Court</b><br><b>Marietta GA 30067</b>                | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |                                                                                                                                                                                                                                       |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | VP<br><b>W. Scott Wenhold</b><br><b>814 Livingston Court</b><br><b>Marietta GA 30067</b>                | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |                                                                                                                                                                                                                                       |                                                                                                 |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TVP<br><b>W. Scott Wenhold</b><br><b>814 Livingston Court</b><br><b>Marietta GA 30067</b>               | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |                                                                                                                                                                                                                                       |                                                                                                 |  |
| 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: <u><i>Steven J. Myers</i></u> <b>Steven J. Myers</b> <u>4-23-04</u> <u>770-644-3000</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                         |                                                                                         |                                                                                                                                                                                                                                       |                                                                                                 |  |