

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000030557

FILED  
Mar 20, 2003  
Secretary of State

Entity Name: ATLANTIS PLASTICS, INC.

## Current Principal Place of Business:

2665 S. BAYSHORE DR.  
SUITE 800  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

2665 S. BAYSHORE DR.  
SUITE 800  
MIAMI, FL 33131

## New Mailing Address:

FEI Number: 06-1088270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CALLEJAS, MARIA C  
2665 SOUTH BAYSHOE DRIVE  
SUITE 800  
MIAMI, FL 33133 US

## Name and Address of New Registered Agent:

GERSHMAN, DAVID  
2665 SOUTH BAYSHOE DRIVE  
SUITE 800  
MIAMI, FL 33133 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: DAVID GERSHMAN

03/20/2003

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( )

### OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: KUFFNER, MARILYN D  
Address: 2665 S. BAYSHORE DR., SUITE 800  
City-St-Zip: MIAMI, FL 33133

Title: DVC ( ) Delete  
Name: GEORGE, PHILLIP T MD  
Address: 2601 SO BAYSHORE DR STE 725  
City-St-Zip: MIAMI, FL 33133

Title: PCEO ( ) Delete  
Name: BOVA, ANTHONY R  
Address: 1870 THE EXCHANGE, SUITE 200  
City-St-Zip: ATLANTA, GA 30339

Title: D ( ) Delete  
Name: HORNER, LARRY D  
Address: 100 PARK AVE 28TH FLOOR  
City-St-Zip: NEW YORK, NY 10017

Title: D ( ) Delete  
Name: MURPHY, CHARLES D  
Address: 136 OTTER CLOSE  
City-St-Zip: THE SEA RANCH, CA 95497

Title: D ( ) Delete  
Name: VANATTA, CHESTER B  
Address: 5140 E MISSION HILL DRIVE  
City-St-Zip: TUCSON, AZ 85718

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: MARILYN D. KUFFNER

S

03/20/2003

Electronic Signature of Signing Officer or Director

Date

PAUL SAARI CFO  
1870 THE EXCHANGE STE 200  
ATLANTA GA 30339

EARL W. POWELL COB  
2665 SO BAYSHORE DR STE 800  
MIAMI FL 33133