

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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**May 09 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000001370 (5)
 1. Corporation Name
DAHLONEGA PACKAGING CORPORATION

Principal Place of Business P. O. BOX 68 MURRAYVILLE, GA 30564	Mailing Address P. O. BOX 4100 THE WOODLANDS, TX 77387
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3. Date Incorporated or Qualified 03/17/94	3a. Date of Last Report
4. FEI Number 76-0302048	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 P. O. BOX 68 Suite, Apt. #, etc.	2a. Mailing Address 26 P. O. BOX 4100 Suite, Apt. #, etc.
22 MURRAYVILLE, GA City & State	27 ATTN: TAX DEPT. City & State
23 30564 Zip USA Country	28 77387-4100 Zip USA Country

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

10. Name and Address of New Registered Agent
 81 Name **C T CORPORATION SYSTEM**
 82 Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD
 83
 84 City **PLANTATION** **FL** 85 Zip Code **33324**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAUL T. STECKO	1.2 NAME	
STREET ADDRESS	23 SANDPIPER LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE FOREST, IL 60045	1.4 CITY-ST-ZIP	
TITLE	V/T/C <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUZANNE M. LEFEVRE	2.2 NAME	
STREET ADDRESS	1019 DOBSON STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	EVANSTON, IL 60202	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT A. PAGE	3.2 NAME	
STREET ADDRESS	1124 LOYOLA	3.3 STREET ADDRESS	
CITY-ST-ZIP	LIBERTYVILLE, IL 60048	3.4 CITY-ST-ZIP	
TITLE	V/AS <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT G. SIMPSON	4.2 NAME	
STREET ADDRESS	5627 PALISADE FALLS	4.3 STREET ADDRESS	
CITY-ST-ZIP	KINGWOOD, TX 77345	4.4 CITY-ST-ZIP	
TITLE	V/S <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KARL A. STEWART	5.2 NAME	
STREET ADDRESS	107 PERKINS ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	GREENWICH, CT 06830	5.4 CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERT F. NEECE	6.2 NAME	
STREET ADDRESS	5907 ROCKY BROOK	6.3 STREET ADDRESS	
CITY-ST-ZIP	KINGWOOD, TX 77345	6.4 CITY-ST-ZIP	

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CS 5/19/97

14. I do 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 annual report or supplemental annual 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 12 or Block 13 (changed, or on an attachment with an address).

SIGNATURE: *Robert G. Simpson* APR 28 1997 281/539-6961
 _____ Date _____ Daytime Phone: _____
Robert G. Simpson Vice President

CR2E034 (9/96)

DAHLONEGA PACKAGING CORPORATION
 Corporate Street Address: P. O. Box 68, Murrayville, GA 30564
 Corporate Mailing Address: P. O. Box 68, Murrayville, GA 30564

All Directors' & Officers' business addresses are the same as corporate street and mailing addresses

DIRECTORS

<u>Name</u>	<u>Address</u>	<u>Social Security #</u>
Paul T. Stecko	23 Sandpiper Lane, Lake Forest, IL 60045	209-34-9365

OFFICERS

<u>Name</u>	<u>Position</u>	<u>Address</u>	<u>Social Security #</u>
Paul T. Stecko	President	23 Sandpiper Lane, Lake Forest, IL 60045	209-34-9365
William J. Sweeney	Senior Vice President	3719 Maple Avenue, Terre Haute, IN 47804	089-32-7900
James V. Faulkner, Jr.	Vice President and Assistant Secretary	208 Kensington Court, Houston, TX 77024	113-34-0054
Felton Wayne Gregg	Vice President	3788 S. Rockbridge Rd., Stone Mountain, GA 30087	556-56-2767
Suzanne M. Lefevre	Vice President, Treasurer and Controller	1019 Dobson Street, Evanston, IL 60202	569-08-9885
Karen R. Osar	Vice President and Assistant Treasurer	70 Aviemore Drive, New Rochelle, NY 10804	018-44-3922
Robert A. Page	Vice President	1124 Loyola, Libertyville, IL 60048	456-94-5027
Robert G. Simpson	Vice President and Assistant Secretary	5627 Palisade Falls, Kingwood, TX 77345	359-44-0711
Karl A. Stewart	Vice President and Secretary	107 Perkins Road, Greenwich, CT 06830	450-68-4329
Robert C. Woodall	Vice President - Sales	3485 Langdale Trail, Marietta, GA 30062	253-88-5992
James D. Gaughan	Assistant Secretary	143 Old Stamford Road, New Canaan, CT 06840	460-92-7783
Bert F. Neece	Assistant Secretary	5907 Rocky Brook, Kingwood, TX 77345	327-40-9245
John R. Olsen	Assistant Secretary	5637 No Mango, Chicago, IL 60646	519-62-1536
Paul D. Novas	Assistant Treasurer	53 Canoe Hill Road, New Canaan, CT 06840	001-58-2742

Handwritten initials and numbers: 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 00.