

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2002 8:00 am
Secretary of State

0136229 AT

DOCUMENT # **F97000002343**

1. Entity Name
PACTIV PROTECTIVE PACKAGING INC.

08-11-2002 90174 006 ***550.00

Principal Place of Business Mailing Address
1900 W FIELD COURT **1900 W FIELD COURT**
LAKE FOREST IL 60045 **LAKE FOREST IL 60045**
US **US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **76-0533954** Applied For
 Not Applicable

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

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

7. Name and Address of New Registered Agent
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
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 Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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 | |
|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD MORRIS, JAMES D 309 ROTHBURY CT LAKE BLUFF IL 60044 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVAS BARBOSA, RAYMOND 129 FRANCISCO TER OAK PARK IL 60301 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP BRUSH, DAVID P 18449 W. MEANDER DR GRAYSLAKE IL 60030 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVS FAULKNER, JR, JAMES V 110 ABINGDON AVE KENILWORTH IL 60043 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV HINETT, KENNETH 10 CAMBRIC AVE PITTSFORD NY 14534 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP REEVES, JAN 1900 WEST FIELD CRT LAKE FOREST IL 60045 <input type="checkbox"/> Delete |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP & TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TAX DIRECTOR/ ASSISTANT SEC <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition COCO, CYNTHIA 265 TALLY HO DRIVE VERNON HILLS, IL 60061 |

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: John F. Reinhardt ASSISTANT SECRETARY Date: 8/8/02

CR2E034 (4/02)

Attachment

676846
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Pactiv Protective Packaging, Inc.

Director
James D. Morris

Officers

James D. Morris, President
David P. Brush, Vice President and Treasurer
James V. Faulkner, Vice President and Secretary
Kenneth C. Hinett, Vice President
Stephen T. Auburn, Assistant Secretary
Jay S. Barnes, Assistant Secretary
Lynn J. Carter, Assistant Secretary
Steve Seljulin, Assistant Secretary
Robert A. Wolf, Assistant Treasurer
Cynthia Coco, Assistant Secretary

Business Address

1900 West Field Court, Lake Forest, IL 60045
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Residence

309 Rothbury Ct., Lake Bluff, IL 60044
18449 W. Meander Drive, Grayslake, IL 60030
110 Abingdon Ave., Kenilworth, IL 60043
10 Cambria Circle, Pittsford, NY 14534
1119 Lake Street, Evanston, IL 60201
3414 Woodlands Circle, Macedon, NY 14502
6153 North Kilbourn Ave., Chicago, IL 60646
2395 Brian Drive, Northbrook, IL 60062
570 Patriot Court, Gurnee, IL 60031
255 Tally Ho Drive, Vernon Hills, IL 60061