


H08000272259 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P03103			
1. Corporation Name FULTON PAPER COMPANY			
2. Principal Office Address - No P.O. Box # 850 AQUILA WAY		3. Mailing Office Address P. O. BOX 43884	
Suite, Apt. #, etc. SUITE 110		Suite, Apt. #, etc.	
City & State AUSTELL, GA		City & State ATLANTA, GA	
Zip 30168	Country USA	Zip 30336	Country USA
4. Date Incorporated or Qualified To Do Business in Florida 08/21/1984			
5. FEI Number 58-0250665		Applied For <input type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$3.75 Additional Fee req. filed for a Cert. of Status			
7. Name and Address of Current Registered Agent			
Name DEAN MEAD SERVICES, LLC			
Street Address (P.O. Box Number is Not Acceptable) 800 N. MAGNOLIA AVE.			
Suite, Apt. #, Etc. SUITE 1500			
City ORLANDO		State FL	Zip Code 32803
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.			
Signature of Registered Agent <i>Stephen J. Bourci</i> By: Stephen J. Bourci, Vice President Date: 12/11/2008 REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	HIRSCH, WILLIAM N.	850 AQUILA WAY, STE 110	AUSTELL, GA 30168
EXV	RHODES, CALVIN	850 AQUILA WAY, STE 110	AUSTELL, GA 30168
V	BRACKETT, RUSSELL	850 AQUILA WAY, STE 110	AUSTELL, GA 30168
V	DYCK, ROLAND	850 AQUILA WAY, STE 110	AUSTELL, GA 30168
DFIN	SMITH, RICHARD	850 AQUILA WAY, STE 110	AUSTELL, GA 30168
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of the Agents listed on this form do not qualify for an exemption contained in Chapter 118, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: <i>Richard Smith</i>		Richard Smith, Director of Finance	12/11/2008 878-398-5720
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Corporate Phone #

FILED
 08 DEC 11 AM 9:23
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

REINSTATEMENT

CR2E081 (10/08)

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

12/11

To: The Florida Dept. of State
Subject: 000638.96768

From: Ashley Smith

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Division of Corporations

<https://efile.sunbiz.org/scripts/efilcovr.exe>

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6384

From: Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850)222-1173
Fax Number : (850)224-1640

000638.96768.

CORPORATION REINSTATEMENT

FULTON PAPER COMPANY

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$758.75

\$158.75, client checked box where reinstatement fee should not be imposed.

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Corporate Filing Menu

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