

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03103

FILED
Mar 25, 2009
Secretary of State

Entity Name: FULTON PAPER COMPANY

Current Principal Place of Business:

850 AQUILA WAY
SUITE 110
AUSTELL, GA 30168 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 43884
ATLANTA, GA 30336 US

New Mailing Address:

FEI Number: 58-0250665 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC
800 N MAGNOLIA AVE
SUITE 1500
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HIRSCH, WILLIAM N
Address: 850 AQUILA WAY, SUITE 110
City-St-Zip: AUSTELL, GA 30168

Title: EV (X) Delete
Name: RHODES, CALVIN
Address: 850 AQUILA WAY, SUITE 110
City-St-Zip: AUSTELL, GA 30168

Title: V (X) Delete
Name: BRACKETT, RUSSELL
Address: 850 AQUILA WAY, SUITE 110
City-St-Zip: AUSTELL, GA 30168

Title: V (X) Delete
Name: DYCK, ROLAND
Address: 850 AQUILA WAY, SUITE 110
City-St-Zip: AUSTELL, GA 30168

Title: DFIN () Delete
Name: SMITH, RICHARD
Address: 850 AQUILA WAY, SUITE 110
City-St-Zip: AUSTELL, GA 30168

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: SECT (X) Change () Addition
Name: SMITH, RICHARD
Address: 850 AQUILA WAY, SUITE 110
City-St-Zip: AUSTELL, GA 30168

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICHARD SMITH

Electronic Signature of Signing Officer or Director

SECT

03/25/2009

_____ Date