

No. C 187023		Due no later than Apr 30, 2017 Annual Report Form		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. GLATFELTER CLAIMS MANAGEMENT, INC. ANGELA KRAFT 183 LEADER HEIGHTS RD YORK PA 17402		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	ANTHONY P CAMPISI	183 LEADER HEIGHTS RD	YORK	PA	USA	17402
TREASURER	THOMAS CLEMENTS	183 LEADER HEIGHTS ROAD	YORK	PA	USA	17402
SECRETARY	MICHAEL E. CONWAY	183 LEADER HEIGHTS ROAD	YORK	PA	USA	17402
DIRECTOR	STEPHEN P MCCONAGHY	183 LEADER HEIGHTS ROAD	YORK	PA	USA	17402
PRESIDENT	STEPHEN P. MCCONAGHY	183 LEADER HEIGHTS ROAD	YORK	PA	USA	17402
5. Organized Under the Laws of: PA C 187023		6. Annual Report must be signed.* Signature: Michael E. Conway Name (type or print): Michael E. Conway Date: 04/26/2017 Title: Secretary				
Processed 04/26/2017		* Electronically provided signatures are accepted as original signatures.				