No. <b>C 187023</b>		Due no later than Apr 30, 2018		2. Registered	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form  1. Mailing Address: Correct in this box if needed. GLATFELTER CLAIMS MANAGEMENT, INC. ANGELA KRAFT 183 LEADER HEIGHTS RD YORK PA 17402		12550 W E BOISE ID	CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE  4. Corporations: Enter Names and Busin		oss Addrossos of Dro	sident Secretary and Directors Treasur	ror (ontional)				
Office Held	Name	ess Addresses of Fre	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR TREASURER SECRETARY DIRECTOR PRESIDENT	ANTHONY P THOMAS CL MICHAEL E. STEPHEN P	EMENTS	183 LEADER HEIGHTS RD 183 LEADER HEIGHTS ROAD	YORK YORK YORK YORK YORK YORK	PA PA PA PA PA	USA USA USA USA USA	17402 17402 17402 17402 17402 17402	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
PA C 187023		Signature: Michae		Date: 04/23/2018				
		Name (type or print): Michael E. Conway			Title: Secretary			
Processed 04/23/2018		<ul> <li>* Electronically provi</li> </ul>	ded signatures are accepted as original	signatures.				