

SCC eFile

**2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

213528898

1.) CORPORATION NAME:

TREDEGAR CORPORATION

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **03223823**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1100 BOULDERS PARKWAY

CITY/ST/ZIP: RICHMOND, VA 23225

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	NANCY M TAYLOR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	1100 BOULDERS PARKWAY		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225		

NAME:	A. BRENT KING	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1100 BOULDERS PARKWAY		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225		

NAME:	KEVIN O. LEARY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1100 BOULDERS PARKWAY		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225		

NAME:	LARRY J. SCOTT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1100 BOULDERS PARKWAY		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225		

NAME:	KEVIN O. LEARY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1100 BOULDERS PARKWAY		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225		

NAME:	A. BRENT KING	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1100 BOULDERS PARKWAY		
CITY/ST/ZIP/CO:	RICHMOND, VA 23225		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICIA A. THOMAS ASST SECRETARY 1100 BOULDERS PARKWAY RICHMOND, VA 23225	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AUSTIN BROCKENBROUGH, III DIRECTOR THE ARRINGTON BUILDING 1802 BAYBERRY COURT, SUITE 400 RICHMOND, VA 23226	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONALD T. COWLES DIRECTOR 306 LOCK LANE RICHMOND, VA 23226	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE C. FREEMAN, III DIRECTOR 9201 FOREST HILL AVE # 1 RICHMOND, VA 23235-6865	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN D GOTTWALD DIRECTOR 9030 STONY POINT PKWY STE 170 RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM M. GOTTWALD DIRECTOR 9030 STONY POINT PARKWAY SUITE 170 RICHMOND, VA 23235	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Thomas G. Snead, Jr. DIRECTOR 103 Lockgreen Place RICHMOND, VA 23226	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE A NEWBILL DIRECTOR 5658 LOST OAK DR BATON ROUGE, LA 70817	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS G. SLATER, JR. DIRECTOR RIVERFRONT PLAZA, EAST TOWER 951 EAST BYRD STREET RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	R. GREGORY WILLIAMS DIRECTOR 7275 GLEN FOREST DRIVE, SUITE 100 P.O. BOX 17190 RICHMOND, VA 23226	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ PATRICIA A. THOMAS</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>PATRICIA A. THOMAS, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>6/20/2013</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.