

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	214502531
1.) CORPORATION NAME: <b>FOODSERVICE PACKAGING INSTITUTE, INC.</b>		DUE DATE: <b>2/28/2014</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>LYNN M DYER 201 PARK WASHINGTON COURT FALLS CHURCH, VA</b>		SCC ID NO: <b>F1099219</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FALLS CHURCH CITY (FILED IN ARLINGTON COUNTY)</b>		5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>NY</b>		
6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 201 PARK WASHINGTON COURT CITY/ST/ZIP: FALLS CHURCH, VA 22046		
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: LYNN M DYER TITLE: PRESIDENT ADDRESS: 201 PARK WASHINGTON COURT CITY/ST/ZIP/CO: FALLS CHURCH, VA 22046	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TRACY PEARSON TITLE: VICE CHAIRMAN ADDRESS: 6400 POPLAR AVENUE CITY/ST/ZIP/CO: MEMPHIS, TN 38197	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL EVANS TITLE: CHAIRMAN ADDRESS: 50 EART RIVER CENTER BLVD STE 650 CITY/ST/ZIP/CO: COVINGTON, KY 41001	<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.		
/s/ LYNN M DYER	LYNN M DYER, PRESIDENT	1/6/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
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.		