

1.) CORPORATION NAME:

P. H. Glatfelter Company

DUE DATE: **4/30/2011**

SCC ID NO: **F1664749**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	120,000,000
PREFER	40,000

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 96 S GEORGE ST STE 500

CITY/ST/ZIP: YORK, PA 17401-

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: THOMAS G JACKSON OFFICER DIRECTOR
 TITLE: VP/S
 ADDRESS: 96 S GEORGE ST STE 500
 CITY/ST/ZIP/CO: YORK, PA 17401-

NAME: WILLIAM T YANAVICH III OFFICER DIRECTOR
 TITLE: VICE PRESIDENT
 ADDRESS: 96 S GEORGE ST STE 500
 CITY/ST/ZIP/CO: YORK, PA 17401-

NAME: JOHN P JACUNSKI OFFICER DIRECTOR
 TITLE: CFO
 ADDRESS: 96 S GEORGE ST STE 500
 CITY/ST/ZIP/CO: YORK, PA 17401-

NAME: DANTE C PARRINI OFFICER DIRECTOR
 TITLE: PRESIDENT
 ADDRESS: 96 S GEORGE ST STE 500
 CITY/ST/ZIP/CO: YORK, PA 17401-

NAME: MARK A SULLIVAN OFFICER DIRECTOR
 TITLE: VICE PRESIDENT
 ADDRESS: 96 S GEORGE ST STE 500
 CITY/ST/ZIP/CO: YORK, PA 17401-

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER W ASTLEY VICE PRESIDENT 96 S GEORGE ST STE 500 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBABRATA MUKHERJEE VICE PRESIDENT 96 S GEORGE ST STE 500 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTOPHER W ASTLEY VICE PRESIDENT 96 S GEORGE ST STE 500 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JANIS C JESSE VICE PRESIDENT 96 S GEORGE ST STE 500 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JONATHAN BOURGET VICE PRESIDENT 96 S GEORGE ST STE 500 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTIN RAPP ASST SECRETARY 96 S GEORGE ST STE 500 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE B AMOSS, JR TREASURER 96 S GEORGE ST STE 400 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID C ELDER CORP CONTROLLER 96 S GEORGE ST STE 500 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHLEEN DAHLBERG DIRECTOR 8850 S W 149TH ST MIAMI, FL 22176-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NICHOLAS DEBENEDICTIS DIRECTOR 762 LANCASTER AVE BRYN MAWR, PA 19010-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J ROBERT HALL DIRECTOR 193 MOUNTAINSIDE ROAD MENDHAM, NJ 07945-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD C ILL DIRECTOR 1550 LIBERTY RIDGE DR STE 100 WAYNE, PA 19087-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD J NAPLES DIRECTOR ONE QUAKER PARK 901 HECTOR ST CONSHOHOCKEN, PA 19424-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD L SMOOT DIRECTOR 260 S BROAD ST 16TH FLOOR PHILADELPHIA, PA 19102-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LEE C STEWART DIRECTOR 11 MEADOW RD WESTON, CT 06833-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LINDA M LEVANS ASST SECRETARY 96 S GEORGE ST STE 420 YORK, PA 17401-	<input checked="" type="checkbox"/> OFFICER	<input 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/ LINDA M LEVANS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	LINDA M LEVANS, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	3/4/2011 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.			