

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215511326

1.) CORPORATION NAME:

KapStone Paper and Packaging Corporation

DUE DATE: **4/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER 16TH FL
1111 EAST MAIN STREET**

SCC ID NO: **F1925744**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	175,000,000
PREFER	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1101 SKOKIE BLVD
SUITE 300

CITY/ST/ZIP: NORTHBROOK, IL 60062

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:	MATTHEW KAPLAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1101 SKOKIE BLVD		
	SUITE 300		
CITY/ST/ZIP/CO:	NORTHBROOK, IL 60062		

NAME:	ANDREA TARBOX	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1101 SKOKIE BLVD		
	SUITE 300		
CITY/ST/ZIP/CO:	NORTHBROOK, IL 60062		

NAME:	TIMOTHY DAVISSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1101 SKOKIE BLVD		
	SUITE 300		
CITY/ST/ZIP/CO:	NORTHBROOK, IL 60062		

NAME:	JOHN CHAPMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1101 SKOKIE BLVD		
	SUITE 300		
CITY/ST/ZIP/CO:	NORTHBROOK, IL 60062		

NAME:	JOHNATHAN FURER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1101 SKOKIE BLVD		
	SUITE 300		
CITY/ST/ZIP/CO:	NORTHBROOK, IL 60062		

NAME: DAVID GABRIEL TITLE: DIRECTOR ADDRESS: 1101 SKOKIE BLVD CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BRIAN GAMACHE TITLE: DIRECTOR ADDRESS: 1101 SKOKIE BLVD CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RONALD GIDWITZ TITLE: DIRECTOR ADDRESS: 1101 SKOKIE BLVD CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MATTHEW PAULL TITLE: DIRECTOR ADDRESS: 1101 SKOKIE BLVD CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: S. JAY STEWART TITLE: DIRECTOR ADDRESS: 1101 SKOKIE BLVD CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ROGER W STONE TITLE: DIRECTOR ADDRESS: 1101 SKOKIE BLVD CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID STORCH TITLE: DIRECTOR ADDRESS: 1101 SKOKIE BLVD CITY/ST/ZIP/CO: NORTHBROOK, IL 60062	<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/ ANDREA TARBOX	ANDREA TARBOX, VICE	3/25/2015
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.