

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 828622

FILED
Apr 08, 2009
Secretary of State

Entity Name: VALASSIS DIRECT MAIL, INC.

Current Principal Place of Business:

ONE TARGETING CENTRE
WINDSOR, CT 06095 US

New Principal Place of Business:

Current Mailing Address:

ONE TARGETING CENTRE
WINDSOR, CT 06095 US

New Mailing Address:

FEI Number: 06-0885252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: EVP () Delete
Name: MCCOMBS, DONALD
Address: ONE TARGETING CENTRE
City-St-Zip: WINDSOR, CT 06095

Title: V () Delete
Name: WISELY, TODD
Address: ONE TARGETING CENTRE
City-St-Zip: WINDSOR, CT 06095

Title: S () Delete
Name: HENNESSEY, DAVID
Address: ONE TARGETING CENTRE
City-St-Zip: WINDSOR, CT 06095

Title: CFOT () Delete
Name: MITZEL, STEVE
Address: ONE TARGETING CENTRE
City-St-Zip: WINDSOR, CT 06095

Title: P () Delete
Name: MASON, ROB
Address: ONE TARGETING CENTRE
City-St-Zip: WINDSOR, CT 06095

Title: AS () Delete
Name: GROE, LORNE
Address: ONE TARGETING CENTRE
City-St-Zip: WINDSOR, CT 06095

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE MITZEL

CFOT

04/08/2009

Electronic Signature of Signing Officer or Director

Date