

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003705

FILED
Mar 05, 2008
Secretary of State

Entity Name: BOOK MANUFACTURES' INSTITUTE, INC.

Current Principal Place of Business:

TWO ARMAND BEACH DR SUITE 1B
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

TWO ARMAND BEACH DR SUITE 1B
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 13-0510540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, BRUCE W
TWO ARMAND BEACH DRIVE, 1B
PALM COAST, FL 32137 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

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: UPTON, WILLIAM L
Address: 5411 JACKSON ROAD
City-St-Zip: ANN ARBOR, MI 48106

Title: VC () Delete
Name: FULTZ, KEN
Address: 6680 POE AVENUE
City-St-Zip: DAYTON, OH 45414

Title: S () Delete
Name: SMITH, BRUCE W
Address: TWO ARMAND BEACH DRIVE, 1B
City-St-Zip: PALM COAST, FL 32137

Title: T () Delete
Name: EDWARDS, JOHN J
Address: 2500 SOUTH STATE STREET
City-St-Zip: ANN ARBOR, MI 48106

Title: D () Delete
Name: BACH, DANIEL N
Address: 1530 MCCONNELL ROAD
City-St-Zip: WOODSTOCK, IL 60098

Title: D () Delete
Name: LANE, EDWARD
Address: 111 S. WACKER DRIVE
City-St-Zip: CHICAGO, IL 60606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: FULTZ, KENNETH L
Address: 6680 POE AVENUE
City-St-Zip: DAYTON, OH 45414

Title: VC (X) Change () Addition
Name: CONWAY, JAMES F III
Address: 15 WELLMAN AVENUE
City-St-Zip: N. CHELMSFORD, MA 01863

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

Title: T (X) Change () Addition
Name: PAEGLOW, JOHN R III
Address: 18 INDUSTRIAL PARK ROAD
City-St-Zip: TROY, NY 12180

Title: D (X) Change () Addition
Name: GENOVESE, DAN
Address: 2085 N. CORNELL AVENUE
City-St-Zip: MELROSE PARK, IL 60160

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE W. SMITH

S

03/05/2008

Electronic Signature of Signing Officer or Director

Date