

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000145

FILED
May 01, 2012
Secretary of State

Entity Name: OFFICEMAX NORTH AMERICA, INC.

Current Principal Place of Business:

263 SHUMAN BLVD
NAPERVILLE, IL 60563

New Principal Place of Business:

Current Mailing Address:

263 SHUMAN BLVD
LEGAL DEPT., 5TH FLOOR
NAPERVILLE, IL 60563

New Mailing Address:

FEI Number: 34-1573735 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: EVPD
Name: BROAD, MATTHEW R
Address: 263 SHUMAN BLVD
City-St-Zip: NAPERVILLE, IL 60563 US

Title: PCEO
Name: SALIGRAM, RAVI
Address: 263 SHUMAN BLVD.
City-St-Zip: NAPERVILLE, IL 60563 US

Title: EVP
Name: BESANKO, BRUCE H
Address: 263 SHUMAN BLVD.
City-St-Zip: NAPERVILLE, IL 60563 US

Title: VPTR
Name: GIULIANO, TONY
Address: 263 SHUMAN BLVD.
City-St-Zip: NAPERVILLE, IL 60563 US

Title: SVPS
Name: WAGNER-FLEMING, SUSAN
Address: 263 SHUMAN BLVD.
City-St-Zip: NAPERVILLE, IL 60563 US

Title: EVP
Name: BURDICK, RANDY
Address: 263 SHUMAN BLVD.
City-St-Zip: NAPERVILLE, IL 60563 IL

I hereby 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 all other like empowered.

SIGNATURE: SUSAN WAGNER-FLEMING

SVPS

05/01/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date