


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2004 08:00 AM
Secretary of State

DOCUMENT # F98000004669
 1. Entity Name
CORPORATE EXPRESS OFFICE PRODUCTS, INC.



Principal Place of Business Mailing Address
1 ENVIRONMENTAL WAY **1 ENVIRONMENTAL WAY**
BROOMFIELD, CO 80021 **BROOMFIELD, CO 80021**

DO NOT WRITE IN THIS SPACE



01062004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
84-1248716 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOFFMAN, MARK S 1 ENVIRONMENTAL WAY BROOMFIELD, CO 800213416
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GLOVER, GORDON 1 ENVIRONMENTAL WAY BROOMFIELD, CO 800213416
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CULLRN, THOMAS F 1 ENVIRONMENT WAY BROOMFIELD, CO 800213416
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILSON, NAN 1 ENVIROMENT WAY BROOMFIELD, CO 80021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MCCONNON, LINDA 1 ENVIRONMENTAL WAY BROOMFIELD, CO 80021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000006251
 01/16/04-80028-002. 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _____ 1-8-04 303-664-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #