2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000354

Entity Name: MEADWESTVACO CORPORATION

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
MEADWESTVACO CORPORATION COURTHOUSE PLAZA, N.E. DAYTON, OH 45463				MEADWESTVACO CORPORATION ONE HIGH RIDGE PARK STAMFORD, CT 06905			
Current Mailing Address:				New Mailing Address:			
MEADWESTVACO CORPORATION COURTHOUSE PLAZA, N.E 26TH FLOOR DAYTON, OH 45463			MEADWESTVACO CORPORATION ONE HIGH RIDGE PARK STAMFORD, CT 06905				
FEI Number:	31-1797999	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status	Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, as both							
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.							
SIGNATUR							
	Electroni	c Signature of Registered Agent	t			Date	
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () LUKE, JOHN A J ONE HIGH RIDG STAMFORD, CT	E PARK		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () MCCFORMACK, TRIDENT CAPIT, LAKE FOREST,	AL		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () BREEN, JOHN G 101 PROSPECT CLEVELAND, OH	AVE.		Title: Name: Address: City-St-Zip:	D (X) CAMPBELL, MI 204 INDIAN WA NEW CANAAN,	TERS DRIVE	
Title: Name: Address: City-St-Zip:	WARNER, JANE	TRY SOLOUTIONS		Title: Name: Address: City-St-Zip:	WARNER, JANE 225 GUILFORD		
Title: Name: Address: City-St-Zip:	WILSON, LAWR	ENCE MALL WEST		Title: Name: Address: City-St-Zip:	D (X) KROL, JOHN A 26070 MANDEV BONITA SPRING		
Title: Name: Address: City-St-Zip:	D () CAMPBELL, MIC 501 MERRITT 7 NORWALK, CT			Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN J. CARRARA S 04/28/2006