## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000001440

Entity Name: VON HOFFMANN CORPORATION

FILED Apr 06, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
357 MAIN ARMONK,	STREET NY 10504			111 SOUTH WACKER DRIVE CHICAGO, IL 60606		
Current Mailing Address:			New Maili	New Mailing Address:		
38TH FLO	ACKER DR., LE OOR O, IL 60606	EGAL DEPT.				
FEI Number: 43-0633003 FEI Number Applied For ( )			FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1200 SOU	ORATION SYS TH PINE ISLA ION, FL 33324	ND ROAD				
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATU	RE:					
		ic Signature of Registered Ag	gent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( LANE, EDWAR 111 S. WACKE CHICAGO, IL (	R DR.	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( ) BETTMAN, SUZ 111 S. WACKE CHICAGO, IL (	R DR.	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( PAPARELLA, V 1200 LAKESID BANNOCKBUR	E DR.	Title: Name: Address: City-St-Zip:	D ( MAKI, CHRIS 111 S. WACK CHICAGO, IL	KER DRIVE	
Title: Name: Address: City-St-Zip:	D ( ) LANE, EDWAR 111 S. WACKE CHICAGO, IL (	R DR.	Title: Name: Address: City-St-Zip:	(	( ) Change ( ) Addition	

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: SUZANNE BETTMAN SEC 04/06/2009