2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005
Secretary of State

DOCUMENT# F04000003705

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
33 EASTLAKE DRIVE
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:	MEAD, DAVID N	
Address:	BANTA BOOK GROUP, SURTIS READ PLAZA BOX 60	
City-St-Zip:	MENASHA, WI 549520060	
Title:	VC	( ) Delete
Name:	UPTON, WILLIAM L	
Address:	5411 JACKSON ROAD	
City-St-Zip:	ANN ARBOR, MI 48106	
Title:	S	( ) Delete
Name:	SMITH, BRUCE W	
Address:	33 EASTLAKE DRIVE	
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:	SHAFER, ROBERT L	
Address:	25 WHITNEY ROAD	
City-St-Zip:	MAHWAH, NJ 074303176	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	MATHEWS, ROBERT S	
Address:	1000 CAMERA AVENUE	
City-St-Zip:	ST LOUIS, MO 63126	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 01/26/2005

Electronic Signature of Signing Officer or Director — Date