2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# F94000000793

Entity Name: CENVEO CORPORATION

Current Principal Place of Business:

ONE CANTERBURY GREEN
201 BROAD STREET, 6TH FLOOR
STAMFORD, CT 06901 US

New Principal Place of Business:

Current Mailing Address:

8310 S VALLEY HWY
THIRD FLOOR
ENGLEWOOD, CO 80112 US

New Mailing Address:

ONE CANTERBURY GREEN
201 BROAD STREET, 6TH FLOOR
STAMFORD, CT 06901 US

FEI Number: 84-1250534 **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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CDCE	( ) Delete
Name:	BURTON, SR., ROBERT G C/D/CEO	
Address:	201 BROAD STREET, 6TH FLOOR	
City-St-Zip:	STAMFORD, CT 06901 US	
Title:	CFOD	( ) Delete
Name:	SULLIAVAN, SEAN S CFO/D	
Address:	201 BROAD STREET, 6TH FLOOR	
City-St-Zip:	STAMFORD, CT 06901 US	
Title:	PD	( ) Delete
Name:	OLIVA, THOMAS PD	
Address:	201 BROAD STREET, 6TH FLOOR	
City-St-Zip:	STAMFORD, CT 06901	
Title:	VCPD	(X) Delete
Name:	HARRIS, MICHAEL W VCPD	
Address:	201 BROAD STREET, 6TH FLOOR	
City-St-Zip:	STAMFORD, CT 06901	
Title:	OCFO	( ) Delete
Name:	SULLIVAN, SEAN S OCFO	
Address:	201 BROAD STREET, 6TH FLOOR	
City-St-Zip:	STAMFORD, CT 06901	
Title:	OCEO	( ) Delete
Name:	BURTON, SR,, ROBERT G OCEO	
Address:	201 BROAD STREET, 6TH FLOOR	
City-St-Zip:	STAMFORD, CT 06901	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: SEAN S. SULLIVAN OCFO 04/18/2007

Electronic Signature of Signing Officer or Director Date