

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003853

FILED
Mar 19, 2009
Secretary of State

Entity Name: CORPORATE EXPRESS DOCUMENT & PRINT MANAGEMENT, INC.

Current Principal Place of Business:

4205 SOUTH 96TH STREET
OMAHA, NE 68127 US

New Principal Place of Business:

500 STAPLES DRIVE
FRAMINGHAM, MA 017024478 US

Current Mailing Address:

1 ENVIRONMENTAL WAY
TAX DEPARTMENT
BROOMFIELD, CO 800213146 US

New Mailing Address:

500 STAPLES DRIVE
FRAMINGHAM, MA 017024478 US

FEI Number: 47-0445942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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: D () Delete
Name: MUTSCHLER, JAY
Address: 1 ENVIRONMENTAL WAY 80021-3416
City-St-Zip: BROOMFIELD, CO 800213416 US

Title: VCFO () Delete
Name: VAN HESS, ROBERT
Address: 1 ENVIRONMENTAL WAY
City-St-Zip: BROOMFIELD, CO 800213416

Title: T () Delete
Name: WILSON, NAN
Address: 1 ENVIRONMENTAL WAY
City-St-Zip: BROOMFIELD, CO 800213416

Title: S (X) Delete
Name: CULLEN, THOMAS F
Address: 1 ENVIRONMENTAL WAY
City-St-Zip: BROOMFIELD, CO 800213416

Title: P (X) Delete
Name: CATE, MIKE
Address: 4205 SOUTH 96TH STREET
City-St-Zip: OMAHA, NE 68127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MAHONEY, JOHN
Address: 500 STAPLES DRIVE
City-St-Zip: FRAMINGHAM, MA 017024478 US

Title: TREA (X) Change () Addition
Name: HOTCHKIN, NICHOLAS
Address: 500 STAPLES DRIVE
City-St-Zip: FRAMINGHAM, MA 017024478

Title: SEC (X) Change () Addition
Name: CAMPBELL, KRISTIN
Address: 500 STAPLES DRIVE
City-St-Zip: FRAMINGHAM, MA 017024478

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 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: KRISTIN CAMPBELL

SEC

03/19/2009

Electronic Signature of Signing Officer or Director

Date