

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001242

FILED
Apr 05, 2004
Secretary of State

Entity Name: BOISE CASCADE OFFICE PRODUCTS CORPORATION

Current Principal Place of Business:

1111 W JEFFERSON ST TAX DEPT.
BOISE, ID 837280001

New Principal Place of Business:

Current Mailing Address:

1111 W JEFFERSON ST TAX DEPT
PO BOX 50
BOISE, ID 837280001

New Mailing Address:

FEI Number: 82-0477390 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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: HOLLERAN, J.W
Address: 1111 W. JEFFERSON STREET
City-St-Zip: BOISE, ID 83728

Title: SVPC () Delete
Name: BALKINS, JAMES A III
Address: 800 W BRYN MAWR AVE
City-St-Zip: ITASCA, IL 60143

Title: PCEO () Delete
Name: MILLIKEN, CHRISTOPHER C
Address: 9 PROGRESS ROAD
City-St-Zip: BILLERICA, MA 01821

Title: SV () Delete
Name: MOERDYK, CAROL B
Address: 800 W. BRYN MAWR AVE.
City-St-Zip: ITASCA, IL 60143

Title: AT () Delete
Name: NIELSEN, VAL P
Address: 1111 W. JEFFERSON STREET
City-St-Zip: BOISE, ID 83728

Title: SV () Delete
Name: GOUDGE, DAVID A
Address: 800 WEST BRYN MAWR AVE
City-St-Zip: ITASCA, IL 60143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLLERAN, J W
Address: 1111 W. JEFFERSON STREET
City-St-Zip: BOISE, ID 83728

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

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

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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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VAL P. NIELSEN

AT

04/05/2004

Electronic Signature of Signing Officer or Director

Date