

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15622

FILED
Apr 29, 2009
Secretary of State

Entity Name: BOWNE OF ATLANTA, INC.

Current Principal Place of Business:

1570 NORTHSIDE DRIVE
ATLANTA, GA 30318

New Principal Place of Business:

Current Mailing Address:

55 WATER STREET
NEW YORK, NY 10041

New Mailing Address:

FEI Number: 58-1665019

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 32301 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: SHEA, DAVE
Address: BOWNE & CO, INC 55 WATER ST
City-St-Zip: NEW YORK, NY 10041 US

Title: D () Delete
Name: PENDERS, BILL
Address: BOWNE & CO, INC 55 WATER ST
City-St-Zip: NEW YORK, NY 10041 US

Title: VSD () Delete
Name: SPITZER, SCOTT L
Address: BOWNE & CO. INC., 55 WATER STREET
City-St-Zip: NEW YORK, NY 10041 US

Title: P () Delete
Name: MICHLEWICZ, ROBERT
Address: BOWNE & CO. INC., 55 WATER STREET
City-St-Zip: NEW YORK, NY 10041 US

Title: AS () Delete
Name: VALDEZ, ESTELA
Address: BOWNE & CO. INC., 55 WATER STREET
City-St-Zip: NEW YORK, NY 10041 US

Title: T () Delete
Name: BERNDT, BRYAN
Address: BOWNE & CO. INC., 55 WATER STREET
City-St-Zip: NEW YORK, NY 10041 US

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
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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 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: BRYAN BERNDT

T

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date