

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33416

FILED  
Jan 23, 2006  
Secretary of State

Entity Name: BANTA CORPORATION

## Current Principal Place of Business:

225 MAIN STREET  
P. O. BOX 8003  
MENASHA, WI 549528003 US

## New Principal Place of Business:

## Current Mailing Address:

225 MAIN STREET  
P. O. BOX 8003  
MENASHA, WI 549528003 US

## New Mailing Address:

FEI Number: 39-0148550

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. 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: CB/P ( ) Delete  
Name: STREETER, STEPHANIE A  
Address: 2741 HOLIDAY COURT  
City-St-Zip: NEENAH, WI 54956 US

Title: VP/S ( ) Delete  
Name: KNEEZEL, RONALD D  
Address: 19 BRACKEN COURT  
City-St-Zip: APPLETON, WI 54911 US

Title: CF/T ( ) Delete  
Name: HIBNER, GEOFFREY J  
Address: 1509 HIDDEN ACRES LANE  
City-St-Zip: NEENAH, WI 54956 US

Title: AT/S ( ) Delete  
Name: KNEEZEL, RONALD D  
Address: 19 BRACKEN COURT  
City-St-Zip: APPLETON, WI 54911 US

Title: AS ( ) Delete  
Name: TOBIN, MICHAEL F  
Address: 425 BEAULIEU ROAD  
City-St-Zip: NEENAH, WI 54956 US

Title: V ( ) Delete  
Name: MEYER, DENNIS J  
Address: 1005 PEMBROOK DR  
City-St-Zip: NEENAH, WI 54956 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  
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: MICHAEL TOBIN

AS

01/23/2006

Electronic Signature of Signing Officer or Director

Date