

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837261

FILED
Apr 27, 2012
Secretary of State

Entity Name: THE VALSPAR CORPORATION

Current Principal Place of Business:

901 - 3RD AVENUE S
MINNEAPOLIS, MN 55402 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1461
ATTN: TAX DEPARTMENT
MINNEAPOLIS, MN 55440 US

New Mailing Address:

FEI Number: 36-2443580 **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

OFFICERS AND DIRECTORS:

Title: PCEO
Name: HENDRICKSON, G E
Address: 901 - 3RD AVENUE S
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: EVP
Name: ERDAHL, S L
Address: 901 - 3RD AVENUE S
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: VGCS
Name: ENGH, R
Address: 901 - 3RD AVENUE S
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: D
Name: HENDRICKSON, G E
Address: 901 - 3RD AVENUE S
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: VCFO
Name: WALKER, L A
Address: 901 - 3RD AVENUE S
City-St-Zip: MINNEAPOLIS, MN 55402 US

Title: VT
Name: TREAT, T N
Address: 901 - 3RD AVENUE S
City-St-Zip: MINNEAPOLIS, MN 55402 US

I hereby 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 all other like empowered.

SIGNATURE: T. N. TREAT

_____ Electronic Signature of Signing Officer or Director

VT

04/27/2012

_____ Date