


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2005 8:00 am
Secretary of State

06-29-2005 90003 020 ***550.00

DOCUMENT # F94000002255
 1. Entity Name
CHURCH & DWIGHT CO., INC.



Principal Place of Business Mailing Address
469 NORTH HARRISON STREET **469 NORTH HARRISON STREET**
PRINCETON, NJ 08543-5297 **PRINCETON, NJ 08543-5297**

50054081



06032005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4996950	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR STE 4
WESTON, FL 33331

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing **\$5.00** May Be Added to Fees
 Trust Fund Contribution.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEGGETT, JOHN D III 469 NORTH HARRISON STREET PRINCETON, NJ 08543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V EIRET, ZVI 469 NORTH HARRISON STREET PRINCETON, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BILANSKI, MARKA <i>Susan E. Golay</i> 469 NORTH HARRISON STREET PRINCETON, NJ 085435297
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERT DAVIES <i>JAMES R. GRAIGIE</i> 469 NORTH HARRISON STREET PRINCETON, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECKLEAN, WILLIAM R <i>J. RICHARD LEAMAN JR.</i> 469 NORTH HARRISON STREET PRINCETON, NJ 085435297
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FORSELL, ANDREW C 469 NORTH HARRISON STREET PRINCETON, NJ 085435297

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Andrew C Forsell* *6/17/05* *609-683-5900*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #