

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

04-07-2002 90576 047 ***150.00

0656941 SP

DOCUMENT #	F98000001836
1. Entity Name	
RAYOVAC CORPORATION	

Principal Place of Business	Mailing Address
601 RAYOVAC DR.	601 RAYOVAC DR.
MADISON WI 53744-4960	MADISON WI 53744-4960

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	22-2423556	☐ Applied For
		☐ Not Applicable
5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	☐	FILE NOW!!! FEE IS \$150.00	After May 1, 2002 Fee will be \$550.00	10. Election Campaign Financing Trust Fund Contribution.	☐	\$5.00 May Be Added to Fees
		Make Check Payable to Department of State				

11. OFFICERS AND DIRECTORS	
TITLE	CCBO
NAME	JONES, DAVID A
STREET ADDRESS	601 RAYOVAC DR.
CITY-ST-ZIP	MADISON WI 53744-4960
TITLE	PCDO
NAME	HUSSEY, KENT J
STREET ADDRESS	601 RAYOVAC DR.
CITY-ST-ZIP	MADISON WI 53744-4960
TITLE	D
NAME	SMITH, WARREN C JR
STREET ADDRESS	601 RAYOVAC DR.
CITY-ST-ZIP	MADISON WI 53744-4960
TITLE	D
NAME	DEERING, JOSEPH
STREET ADDRESS	601 RAYOVAC DR.
CITY-ST-ZIP	MADISON WI 53744-4960
TITLE	D
NAME	SCHOEN, SCOTT A
STREET ADDRESS	601 RAYOVAC DR.
CITY-ST-ZIP	MADISON WI 53744-4960
TITLE	D
NAME	SHEPHERD, THOMAS A
STREET ADDRESS	601 RAYOVAC DR.
CITY-ST-ZIP	MADISON WI 53744-4960

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D
NAME	Wackel, Scott L.
STREET ADDRESS	601 RAYOVAC DR
CITY-ST-ZIP	MADISON, WI 53744-4960
TITLE	D
NAME	Pellegrino, Phillip F
STREET ADDRESS	601 Rayovac Dr
CITY-ST-ZIP	MADISON WI 53744-4960
TITLE	D
NAME	Lupo, John S
STREET ADDRESS	601 Rayovac Dr
CITY-ST-ZIP	MADISON WI 53744-4960
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Scott L. Wackel* **3-27-02** **(608) 275-4488**

CR2E034 (9/01)