

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F98000001836 1. Entity Name RAYOVAC CORPORATION	
--	---

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

DO NOT WRITE IN THIS SPACE

FILED
04 NOV -8 PM 4:00
SECRETARY OF STATE
FLORIDA


03/31/04 90001 009 \$150.00
03092004 No Chg-P CR2E034 (10/03)

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCEO JONES, DAVID A 601 RAYOVAC DR. MADISON, WI 537444960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOO HUSSEY, KENT J 601 RAYOVAC DR. MADISON, WI 537444960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, RANDALL 601 RAYOVAC DR. MADISON, WI 537444960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOMLIN, MERRELL M 601 RAYOVAC DR. MADISON, WI 537444960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHANESY, STEPHEN P 601 RAYOVAC DR. MADISON, WI 537444960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP BUREL, REMY 601 RAYOVAC DR. MADISON, WI 537444960

**DO NOT WRITE
IN THIS SPACE**

BR 4/5

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/04 **770-829-6220**
Date Daytime Phone #



Deloitte Tax LLP
555 E. Wells Street, Suite 1400
Milwaukee, WI 53202-3824
USA

Tel: +1 414 271 3000
www.deloitte.com

November 2, 2004

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Rayovac Corporation
Document Number F98000001836

Dear Sir or Madam:

We are writing on behalf of the above named taxpayer in response to the enclosed Notice of Dissolution or Revocation received October 28, 2004.

Per discussion with a Secretary of State representative on October 28, 2004, the original notice rejecting the 2004 Annual Report filed on March 24, 2004 was not received by the appropriate party at Rayovac. The original notice rejected the 2004 Annual Report because the corporate officer incorrectly signed on Line 8, instead of Line 12.

Since we did not receive the original notice of rejection, we have been instructed to re-file the 2004 Annual Report along with a \$400 late filing fee. We do not agree with the \$400 late filing fee and are requesting it be waived. The original annual report was timely filed and the \$150 fee that was submitted was cashed by the Department of State on April 5, 2004. As support we have included a copy of the cancelled check.

We have enclosed the 2004 Annual Report signed on Line 12 by a corporate officer.

If you have any further questions, please contact me at (414) 977-2536.

Very truly yours,

Raymond F. Coertz

db\N\AR\Rayovac\2004\102804a.doc

Enclosures