

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *F98000003041*  
 1. Entity Name  
*Schlage Lock Company*

**DO NOT WRITE IN THIS SPACE**

*654650*

2. Principal Place of Business <i>Co Ingersoll Road</i> Suite, Apt. #, etc. <i>200 Chestnut Ridge Rd</i> City & State <i>Woodcliff Lake NJ</i> Zip <i>07675</i> Country <i>usa</i>		3. Mailing Address <i>Co Ingersoll Road</i> Suite, Apt. #, etc. <i>200 Chestnut Ridge Rd</i> City & State <i>Woodcliff Lake NJ</i> Zip <i>07675</i> Country <i>usa</i>	
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4. FEI Number <i>94-0846090</i>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

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7. Name and Address of Current Registered Agent  
 Name *CT Corporation System*  
 Street Address (P.O. Box Number is Not Accepted)  
*1200 South Pine Island Rd*  
 City *Plantation* State *FL* Zip Code *33324*

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

*See attached schedule*

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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 on an attachment with an address, with all other like empowers.

SIGNATURE: *[Signature]* *4/23/02*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

Attachment Det# ~~FA80000~~ 3041 / 654650

**Schlage Lock Company**  
**Names and Business Addresses of Officers**

R. Smith	President	111 Congressional Blvd Carmel, IN 46032
C. V. Havill	Vice President	111 Congressional Blvd Carmel, IN 46032
R. L. Steinman	Vice President	1915 Jamboree Dr Colorado Springs, CO 80920
W. Brown	Controller	1915 Jamboree Dr Colorado Springs, CO 80920
P. Hong	Treasurer	200 Chestnut Ridge Rd Woodcliff Lake, NJ 07677
R. G. Heller	Secretary	200 Chestnut Ridge Rd Woodcliff Lake, NJ 07677
D. Buzinkai	Controller	1915 Jamboree Dr Colorado Springs, CO 80920
P. Nactigal	Director	200 Chestnut Ridge Rd Woodcliff Lake, NJ 07677
G. E. Swimmer	Director	200 Chestnut Ridge Rd Woodcliff Lake, NJ 07677
R. G. Heller	Director	200 Chestnut Ridge Rd Woodcliff Lake, NJ 07677
R. Smith	Director	111 Congressional Blvd Carmel, IN 46032