

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14681

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE GLIDDEN COMPANY

Current Principal Place of Business:

15885 W. SPRAGUE RD.
STRONGSVILLE, OH 44136 US

New Principal Place of Business:

Current Mailing Address:

HQE - TAX DEPT.
15885 W. SPRAGUE RD.
STRONGSVILLE, OH 44136

New Mailing Address:

C/O AKZO NOBEL TAX DEPARTMENT
525 W. VAN BUREN ST., 16TH FLOOR
CHICAGO, IL 60607

FEI Number: 51-0290518

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BOUTS, ERIK
Address: 15885 W SPRAGUE RD
City-St-Zip: STRONGSVILLE, OH 44136 US

Title: DVP () Delete
Name: LOOSE, DAVID J
Address: 15885 W. SPRAGUE RD.
City-St-Zip: STRONGSVILLE, OH 44136 US

Title: AT () Delete
Name: SHANBHAG, ASHWIN
Address: 15885 W. SPRAGUE RD.
City-St-Zip: STRONGSVILLE, OH 44136 US

Title: AS () Delete
Name: KRUEGER, WILLIAM J
Address: 15885 W. SPRAGUE RD.
City-St-Zip: STRONGSVILLE, OH 44136 US

Title: AS (X) Delete
Name: CURRAN, BARBARA S
Address: 1000 UNIQEMA BLVD
City-St-Zip: NEW CASTLE, DE 19720

Title: DVPT () Delete
Name: MCKINLEY, CATHERINE M
Address: 15885 W SPRAGUE RD
City-St-Zip: STRONGSVILLE, OH 44136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: JACKSON, JAMES
Address: 525 W. VAN BUREN, 16TH FLOOR
City-St-Zip: CHICAGO, IL 60607 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES JACKSON

AT

04/16/2009

Electronic Signature of Signing Officer or Director

Date