

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006088

Entity Name: STANLEY BLACK & DECKER, INC.**Current Principal Place of Business:**1000 STANLEY DRIVE
NEW BRITAIN, CT 06053**Current Mailing Address:**1000 STANLEY DRIVE
NEW BRITAIN, CT 06053 US**FEI Number:** 06-0548860**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US*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:** JILL CILMI

03/02/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, CHIEF FINANCIAL
OFFICER, DIRECTOR
Name ALLAN, DONALD JR.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR
Name AYERS, ANDREA J.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR
Name HANKIN, MICHAEL D.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR
Name MITCHELL, ADRIAN V.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title SECRETARY
Name LINK, JANET M.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR
Name CREW, DEBRA ANN
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR
Name MANNING, ROBERT
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR
Name PALMIERI, JANE M.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

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I hereby 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 all other like empowered.

SIGNATURE: JANET M. LINK**SECRETARY**

03/02/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name POUL, MOJDEH
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053

Title DIRECTOR
Name CARTER, SUSAN K.
Address 1000 STANLEY DRIVE
City-State-Zip: NEW BRITAIN CT 06053