

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 169211

Entity Name: THE STEPHAN CO.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1850 W MC NAB ROAD
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

1850 W MC NAB ROAD
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 59-0676812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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: S () Delete
Name: KESTER, TYLER ASST.
Address: 1850 W MCNAB ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DSVP () Delete
Name: CARLSON, CURTIS
Address: 1850 W MCNAB ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: AS () Delete
Name: BABB, BRETT L
Address: 1850 W MCNAB RD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: PD () Delete
Name: FEROLA, FRANK F
Address: 1850 W MCNAB RD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: D () Delete
Name: SHAHEEN, SHOUKY
Address: 1850 W MCNAB RD
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: ROSS, ELLIOT
Address: 1850 W. MCNAB RD.
City-St-Zip: FT. LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: CFO (X) Change () Addition
Name: SPINDLER, ROBERT
Address: 1850 W. MCNAB RD.
City-St-Zip: FT. LAUDERDALE, FL 33309

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: L. BRETT BABB

ASEC

04/29/2009

Electronic Signature of Signing Officer or Director

Date