

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2005 8:00 am
Secretary of State

02-04-2005 90044 033 ***150.00

40012568



01202005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1148072

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME SLY, PATRICK J
STREET ADDRESS 8000 W. FLORISSANT
CITY-ST-ZIP ST. LOUIS, MO 631368506

TITLE P
NAME CLEMENTS, ROBERT
STREET ADDRESS 650 S.W. 27TH AVENUE
CITY-ST-ZIP OCALA, FL 34474

TITLE VP
NAME CHARLES, DEBRA
STREET ADDRESS 650 S.W. 27TH AVENUE
CITY-ST-ZIP OCALA, FL 34474

TITLE DS
NAME SMITH, HARLEY M
STREET ADDRESS 8000 W. FLORISSANT
CITY-ST-ZIP SAINT LOUIS, MO 63136

TITLE DAS
NAME BAUER, CARL T
STREET ADDRESS 8000 W. FLORISSANT
CITY-ST-ZIP SAINT LOUIS, MO 63136

TITLE VPAT
NAME MOON, DAVID C
STREET ADDRESS 8000 W FLORISSANT AVE
CITY-ST-ZIP SAINT LOUIS, MO 63136

**DO NOT WRITE
IN THIS SPACE**

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

David C. Moon
V.P. & Asst. Treasurer

1/20/05

Date

314-553-2058

Daytime Phone #

Please see attached list for additional officers & directors.

ATTACHMENT
CLOSETMAID CORPORATION
OFFICERS & DIRECTORS LISTING

40012568
295971

DIRECTORS:

P.J. Sly
8000 W. Florissant Ave.
St. Louis, MO 63136

C.T. Bauer
8000 W. Florissant Ave.
St. Louis, MO 63136

H.M. Smith
8000 W. Florissant Ave.
St. Louis, MO 63136

OFFICERS:

C.T. Bauer – Asst. Secretary
8000 W. Florissant Ave.
St. Louis, MO 63136

D.M. Charles – Vice President – Finance
650 SW 27th Ave.
Ocala, FL 34474

R. Clements – President
650 SW 27th Ave.
Ocala, FL 34474

C. Moeller – Vice President – Marketing
650 SW 27th Ave.
Ocala, FL 34474

D.C. Moon – Vice President & Asst. Treasurer
8000 W. Florissant Ave.
St. Louis, MO 63136

D.J. Rabe – Treasurer
8000 W. Florissant Ave.
St. Louis, MO 63136

P.H. Shrigley – Vice President – Sales
650 SW 27th Ave.
Ocala, FL 34474

H.M. Smith – Secretary
8000 W. Florissant Ave.
St. Louis, MO 63136

W.E. Watts – Vice President – MIS
650 SW 27th Ave.
Ocala, FL 34474