2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 807954

City-St-Zip: CHICAGO, IL 60611

() Delete

MCCOLLUM, W. LEE

RACINE, WI 53402

5131 RAVENSWOOD LANE

Title:

Name:

Address:

City-St-Zip:

Entity Name: S.C. JOHNSON & SON, INC.

FILED Jan 27, 2005 Secretary of State

		voorva oorv, nvo.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	/E STREET VI 534032236					
Current Mailing Address:			New Mailing Address:			
1525 HOW	/E STREET					
MS 412 RACINE, WI 534032236						
•						
FEI Number:	: 39-0379990	FEI Number Applied For ()	FEI Number Not Appl	icable () Certific	cate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Re	gistered Agent:	
1200 S. PII	ORATION SYS NE ISLAND RO ON, FL 33324					
	named entity s e of Florida.	ubmits this statement for the pur	pose of changing it	s registered office or	registered agent, or both,	
SIGNATUR	RE:					
		c Signature of Registered Agent			Date	
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () PEREZ, WILLIA 3101 MICHIGAN RACINE, WI		Title: Name: Address: City-St-Zip:	CEO (X) Change JOHNSON, H. FISK 1525 HOWE ST. RACINE, WI 53403 US	() Addition	
Title: Name: Address: City-St-Zip:	V () WALLER, J M 4601 LAKE MEA RACINE, WI	Delete .DOW DR	Title: Name: Address: City-St-Zip:	P (X) Change MAY, DAVID L 1525 HOWE ST. RACINE, WI 53403 US	() Addition	
Title: Name: Address: City-St-Zip:	T () ECKHARDT, MA 5792 FINCH LAN GREENDALE, W	1E	Title: Name: Address: City-St-Zip:	MCCOLLUM, W. L 1525 HOWE ST	() Addition	
Title: Name: Address: City-St-Zip:	VS () HECKER, DAVIE 14470 WOODLA ELM GROVE, W	WN CIRCLE	Title: Name: Address: City-St-Zip:	S (X) Change HECKER, DAVID 1525 HOWE ST RACINE, WI 53403 US	() Addition	
Title: Name: Address:	CD () JOHNSON, FISK 161 E CHIAGE A		Title: Name: Address:	T (X) Change ECKHARDT, MARK H 1525 HOWE ST	() Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Title:

Name:

Address:

City-St-Zip:

City-St-Zip: RACINE, WI 53403 US

RANDLEMAN, ROBERT S

RACINE, WI 53403 US

1525 HOWE ST

(X) Change () Addition

SIGNATURE: ROBERT S. RANDLEMAN V 01/27/2005