

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 823312

FILED
Jan 14, 2009
Secretary of State

Entity Name: MCCORMICK DISTILLING COMPANY

Current Principal Place of Business:

ONE MCCORMICK LANE
WESTON, MO 640989558

New Principal Place of Business:

Current Mailing Address:

ONE MCCORMICK LANE
WESTON, MO 640989558

New Mailing Address:

FEI Number: 43-1624985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERINOFF, SPENCER
3700 COMMERCE PARKWAY
MIRAMAR, FL 33025 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: PCOO () Delete
Name: ZARGO, JAMES A
Address: 3805 N.W. 75TH
City-St-Zip: KANSAS CITY, MO 64151

Title: VD () Delete
Name: HARRIS, MICHEAL S
Address: 16339 290TH RD
City-St-Zip: ATCHISON, KS 66002

Title: S () Delete
Name: HUNT, BEATRICE E
Address: 18660 ELM GROVE ROAD
City-St-Zip: PLATTE CITY, MO 64079

Title: D () Delete
Name: PECHAR, EDWARD A
Address: 5509 WINDMIER CIR.
City-St-Zip: DALLAS, TX 75252

Title: VD () Delete
Name: FERNANDEZ, CHRIS
Address: 11301 W. 138TH ST
City-St-Zip: OVERLAND PARK, KS 66221

Title: D () Delete
Name: HILLSMAN, RICHARD G
Address: 924 N BRAINARD
City-St-Zip: ARLINGTON HEIGHTS, IL 60526

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:

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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: OFFICIER/MIKE FRIZZELL

TREA

01/14/2009

Electronic Signature of Signing Officer or Director

Date