

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 825593

FILED
Apr 21, 2009
Secretary of State

Entity Name: THE WELLA CORPORATION

Current Principal Place of Business:

ONE PROCTER & GAMBLE PLAZA
CINCINNATI, OH 45201 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 599
ATTN: TAX DIVISION
CINCINNATI, OH 45201

New Mailing Address:

FEI Number: 13-3146121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT 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: CEOP () Delete
Name: CARRANZA, R
Address: 6109 DESOTO AVE.
City-St-Zip: WOODLAND HILLS, CA 91367 US

Title: CFOV () Delete
Name: BOEUF, PATRICK
Address: 6109 DESOTO AVE.
City-St-Zip: WOODLAND HILLS, CA 91367 US

Title: T () Delete
Name: FERNANDO, GUY
Address: 6109 DESOTO AVE.
City-St-Zip: WOODLAND HILLS, CA 91367 US

Title: VGCS () Delete
Name: RIEDEL, M
Address: 6109 DESOTO AVE.
City-St-Zip: WOODLAND HILLS, CA 91367 US

Title: AS () Delete
Name: SNELLGROVE, D K
Address: ONE PROCTER & GAMBLE PLAZA
City-St-Zip: CINCINNATI, OH 45202

Title: AS () Delete
Name: KEMEN, T E
Address: ONE PROCTER & GAMBLE PLAZA
City-St-Zip: CINCINNATI, OH 45202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SHIRLEY, EDWARD D
Address: ONE PROCTER & GAMBLE PLAZA
City-St-Zip: CINCINNATI, OH 45202 US

Title: VPFI (X) Change () Addition
Name: MOELLER, JON R
Address: ONE PROCTER & GAMBLE PLAZA
City-St-Zip: CINCINNATI, OH 45202 US

Title: VPCT (X) Change () Addition
Name: SHEPPARD, VALARIE L
Address: ONE PROCTER & GAMBLE PLAZA
City-St-Zip: CINCINNATI, OH 45202 US

Title: TRES (X) Change () Addition
Name: LIST, TERI L
Address: ONE PROCTER & GAMBLE PLAZA
City-St-Zip: CINCINNATI, OH 45202 US

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: T. E KEMEN

Electronic Signature of Signing Officer or Director

MR.

04/21/2009

Date