2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 845104

Entity Name: DIXON TICONDEROGA COMPANY

FILED Jul 21, 2005 Secretary of State

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|---|---|----------------------------------|---|---|---|
| Current Pr | of Business: | New Principal Place of Business: | | | |
| 195 INTERNATIONAL PARKWAY HEATHROW, FL 327465036 US | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| P.O. BOX 958413 HEATHROW, FL 327958413 US | | | | | |
| FEI Number: 23-0973760 FEI Number Applied For () FEI Num | | | nber Not Applicable () Certificate of Status Desired (X) | | |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: | | | | | |
| CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US | | | | | |
| 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 | | | | | |
| In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | | | |
| Title: Name: Address: City-St-Zip: | PCEO () JOYCE, RICHAR 3068 TIMPANA LONGWOOD, F | | Title: Name: Address: City-St-Zip: | CURRIE, DO 837 WOODB | |
| Title: Name: Address: City-St-Zip: | EVPT () ASTA, RICHARE 214 HEATHERV WINTER SPRIN | OOD CT | Title: Name: Address: City-St-Zip: | | ()Change ()Addition |
| Title: Name: Address: City-St-Zip: | S () HEMMINGS, LA 467 HAMPTON O HEATHROW, FL | CREST CIR 201 | Title: Name: Address: City-St-Zip: | DAHLBERG, | NGELINA DRIVE |
| Title: Name: Address: City-St-Zip: | CEO () PALA, GINO N., 394 DEVON PLA HEATHROW, FL | | Title: Name: Address: City-St-Zip: | VPF MARTINEZ, 301 FEATHE LONGWOOD | R PLACE |
| Title: Name: Address: City-St-Zip: | C () ADORNETTO, J 362 WEKIVA CO LONGWOOD, F | OVE ROAD | Title: Name: Address: City-St-Zip: | | ()Change ()Addition |
| Title: Name: Address: City-St-Zip: | GRAINGER, GA | DNAL PARKWAY | Title: Name: Address: City-St-Zip: | GRAINGER, 6834 SOUTH | (X) Change () Addition GARRETT ATLANTIC AVE. NA BEACH FI 32169 |

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.

SIGNATURE: JOHN ADORNETTO CNTR 07/21/2005