

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851339

FILED
Mar 30, 2009
Secretary of State

Entity Name: RUSSELL STOVER CANDIES, INC.

Current Principal Place of Business:

4900 OAK STREET
ATTN: ACCOUNTING
KANSAS CITY, MO 64112 US

New Principal Place of Business:

Current Mailing Address:

4900 OAK STREET
ATTN: ACCOUNTING
KANSAS CITY, MO 64112 US

New Mailing Address:

FEI Number: 43-1243415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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: P () Delete
Name: WARD, SCOTT H,
Address: 1217 W. 55TH ST
City-St-Zip: KANSAS CITY, MO 00000,

Title: S () Delete
Name: WARD, THOMAS,
Address: 2920 VERONA ROAD
City-St-Zip: SHAWNEE MISSION, KS

Title: VD () Delete
Name: O'HARA, LINDA L
Address: 2601 S WARSON RD
City-St-Zip: SAINT LOUIS, MO 63124

Title: VP () Delete
Name: WARD, ADELAIDE C.
Address: 5049 WORNAIL ROAD 3CD
City-St-Zip: KANSAS CITY, MO 64112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: O'HARA, LINDA L
Address: 2601 S WARSON RD
City-St-Zip: SAINT LOUIS, MO 63124

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: PAUL R BILLINGTON

VP

03/30/2009

Electronic Signature of Signing Officer or Director

_____ Date