


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90119 034 ***150.00

DOCUMENT # F02000004387 1. Entity Name CLOSETMAID NORTH AMERICA, INC.	
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Principal Place of Business 650 SW 27TH AVE. OCALA, FL 34474	Mailing Address 8000 W FLORISSANT AVE STA 2586 SAINT LOUIS, MO 63136
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DO NOT WRITE IN THIS SPACE



02162006 No Chg-P CR2E034 (11/05)

4. FEI Number 26-0041539	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

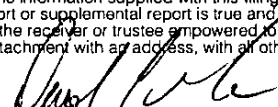
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CLEMENTS, ROBERT J 650 SW 27TH AVE OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CHARLES, DEBBIE M 650 SW 27TH AVE OCALA, FL 34474
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SMITH, HARLEY M 8000 W FLORISSANT AVE SAINT LOUIS, MO 63136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RABE, DAVID J 8000 W. FLORISSANT AVE ST LOUIS, MO 63136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAS BAUER, CARL T 8000 W FLORISSANT AVE SAINT LOUIS, MO 63136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLY, PATRICK J 8000 W. FLORISSANT AVE ST LOUIS, MO 63136

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **David C. Moon, V.P./Asst. Treasurer** 2/16/06 314-553-2058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

ClosetMaid North America, Inc. Directors & Officers

DIRECTORS:

Patrick J. Sly
8000 W. Florissant Ave.
St. Louis, MO 63136

Carl T. Bauer
8000 W. Florissant Ave.
St. Louis, MO 63136

Harley M. Smith
8000 W. Florissant Ave.
St. Louis, MO 63136

OFFICERS:

Carl T. Bauer – Asst. Secretary
8000 W. Florissant Ave.
St. Louis, MO 63136

Debbie M. Charles – Vice President – Finance
650 SW 27th Ave.
Ocala, FL 34474

Robert J. Clements – President
650 SW 27th Ave.
Ocala, FL 34474

Craig Moeller – Vice President – Marketing
650 SW 27th Ave.
Ocala, FL 34474

David C. Moon – Vice President & Asst. Treasurer
8000 W. Florissant Ave.
St. Louis, MO 63136

David J. Rabe – Treasurer
8000 W. Florissant Ave.
St. Louis, MO 63136

Phil H. Shrigley – Vice President – Sales
650 SW 27th Ave.
Ocala, FL 34474

Harley M. Smith – Secretary
8000 W. Florissant Ave.
St. Louis, MO 63136

Wally E. Watts – Vice President – MIS
650 SW 27th Ave.
Ocala, FL 34474

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