

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 07, 2008 8:00 am**  
**Secretary of State**

03-07-2008 90040 001 \*\*\*150.00

**DOCUMENT # F03000001116**

1. Entity Name

ENERGIZER BATTERY MANUFACTURING, INC.



Principal Place of Business

C/O ENERGIZER  
533 MARYVILLE UNIVERSITY DR  
ST LOUIS MO 63141

Mailing Address

C/O ENERGIZER  
533 MARYVILLE UNIVERSITY DR  
ST LOUIS MO 63141



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number

01-0758278

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
C/O CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2008 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	MCCLANATHAN, JOSEPH W	
STREET ADDRESS	533 MARGVILLE UNIVERSITY DR	
CITY-ST-ZIP	SAINT LOUIS MO 63141	
TITLE	COB	<input type="checkbox"/> Delete
NAME	KLEIN, WARD M	
STREET ADDRESS	533 MARYVILLE UNIVERSITY DR.	
CITY-ST-ZIP	ST LOUIS MO 63141	
TITLE	EVP	<input type="checkbox"/> Delete
NAME	SESCLEIFER, DANIEL J	
STREET ADDRESS	533 MARYVILLE UNIVERSITY DR.	
CITY-ST-ZIP	ST LOUIS MO 63141	
TITLE	VPCT	<input type="checkbox"/> Delete
NAME	CARPENTER, DAN	
STREET ADDRESS	533 MARYVILLE UNIVERSITY DR.	
CITY-ST-ZIP	ST LOUIS MO 63141	
TITLE	VP	<input type="checkbox"/> Delete
NAME	TISONE, JOSEPH J	
STREET ADDRESS	533 MARYVILLE UNIVERSITY DR.	
CITY-ST-ZIP	ST LOUIS MO 63141	
TITLE	VPGC	<input type="checkbox"/> Delete
NAME	STRATMANN, GAYLE G	
STREET ADDRESS	533 MARYVILLE UNIVERSITY DR.	
CITY-ST-ZIP	ST LOUIS MO 63141	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Barb M. Brinkney* Barb M. Brinkney 2-20-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

314-985-2000

Daytime Phone

**ENERGIZER BATTERY MANUFACTURING, INC.**  
**DIRECTORS / OFFICERS REPORT**

**Address**

533 Maryville University Drive, St. Louis, MO 63141  
533 Maryville University Drive, St. Louis, MO 63141  
533 Maryville University Drive, St. Louis, MO 63141

### Address

[illegible]