

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006099

FILED
Apr 20, 2011
Secretary of State

Entity Name: BRUNSWICK PRODUCT PROTECTION CORPORATION OF FLORIDA

Current Principal Place of Business:

1 N. FIELD CT.
LAKE FOREST, IL 60045

New Principal Place of Business:

Current Mailing Address:

1 N. FIELD CT.
LAKE FOREST, IL 60045

New Mailing Address:

FEI Number: 20-0433647 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

C T 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: WARD, SCOTT R
Address: 1 N. FIELD CT.
City-St-Zip: LAKE FOREST, IL 60045

Title: DIR
Name: METZGER, WILLIAM L
Address: 1 N. FIELD CT.
City-St-Zip: LAKE FOREST, IL 60045

Title: ASEC
Name: VAUGHN, MARSHA T
Address: 1 N. FIELD CT.
City-St-Zip: LAKE FOREST, IL 60045

Title: DIR
Name: WARD, SCOTT R
Address: 1 N. FIELD COURT
City-St-Zip: LAKE FOREST, IL 60045

Title: VPT
Name: METZGER, WILLIAM L
Address: 1 N. FIELD COURT
City-St-Zip: LAKE FOREST, IL 60045

Title: SEC
Name: SUSAN, LIFVENDAHL
Address: 1 N. FIELD COURT
City-St-Zip: LAKE FOREST, IL 60045

I hereby 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 all other like empowered.

SIGNATURE: MARSHA T. VAUGHN

ASEC

04/20/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date