2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004713

Entity Name: FULLER BRUSH COMPANY INC.

FILED Feb 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE FULLER WAY GREAT BEND, KS 67530 **Current Mailing Address: New Mailing Address:** P.O. BOX 729 GREAT BEND, KS 67530 FEI Number: 16-1462722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition HENDRICKSON, THOMAS N HENDRICKSON, THOMAS N Name: Name: 5 SIMMONS ROAD 5 SIMMONS ROAD Address: Address: City-St-Zip: PERRY, NY 14530 City-St-Zip: PERRY, NY 14530 Title: Title: () Delete TD (X) Change () Addition WELDGEN, THOMAS J WELDGEN, THOMAS J Name: Name: 29 BLANDFORD LANE **5 REISLING COURT** Address: Address: FAIRPORT, NY 14450 FAIRPORT, NY 14450 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition GROS, BRADY GROS, BRADY Name: Name: ROUTE 3- BOX 137F ROUTE 3- BOX 137F Address: Address: City-St-Zip: GREAT BEND, KS 67530 City-St-Zip: GREAT BEND, KS 67530 Title: () Delete Title: () Change () Addition OPPENHEIMER, ROBERT Name: Name: Address: 16 BROOKWOOD ROAD Address: City-St-Zip: PITTSFORD, NY 14534 City-St-Zip: Title: Title: () Delete () Change () Addition PEMBROKE, JAMES W Name: Name: 5 SCARBOROUGH PARK Address: Address: City-St-Zip: ROCHESTER, NY 14625 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES W PEMBROKE S 02/08/2007