

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004713

FILED
Apr 25, 2008
Secretary of State

Entity Name: FULLER BRUSH COMPANY INC.

Current Principal Place of Business:

ONE FULLER WAY
GREAT BEND, KS 67530

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 729
GREAT BEND, KS 67530

New Mailing Address:

FEI Number: 16-1462722 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: HENDRICKSON, THOMAS N
Address: 5 SIMMONS ROAD
City-St-Zip: PERRY, NY 14530

Title: TD () Delete
Name: WELDGEN, THOMAS J
Address: 5 REISLING COURT
City-St-Zip: FAIRPORT, NY 14450

Title: P () Delete
Name: GROS, BRADY
Address: ROUTE 3- BOX 137F
City-St-Zip: GREAT BEND, KS 67530

Title: D (X) Delete
Name: OPPENHEIMER, ROBERT
Address: 16 BROOKWOOD ROAD
City-St-Zip: PITTSFORD, NY 14534

Title: S () Delete
Name: PEMBROKE, JAMES W
Address: 5 SCARBOROUGH PARK
City-St-Zip: ROCHESTER, NY 14625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JAMES W PEMBROKE

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04/25/2008

Electronic Signature of Signing Officer or Director

_____ Date