2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001509

Entity Name: ZINSSER CO., INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
173 BELMONT DR SOMERSET, NJ 08875					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
173 BELMONT DR SOMERSET, NJ 08875					
FEI Number: 1	13-1497940	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
THE PRENTICE-HALL CORPORATION SYSTEM,INC 1201 HAYS STREET TALLAHASSEE, FL 32301 US					
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:					
	Electro	onic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C (SULLIVAN, FF 2628 PEARL MEDINA, OH	RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (RICE, RONAL 2628 PEARL MEDINA, OH	D.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (TELLOR, MIK 173 BELMON SOMERSET, I	T DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (TOMPKINS, P 2628 PEARL MEDINA, OH	rK RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (O'DONOVAN, 173 BELMON SOMERSET, I	T DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SRIVASTAVA, 146 TIMBER I		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GERRY DURATZ, ACCOUNTING SUPERVISOR SUPV 04/27/2006