

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000006136

Entity Name: STANT CORPORATION

FILED
May 21, 2009
Secretary of State

Current Principal Place of Business:

6450 POE AVE
SUITE 1090
DAYTON, OH 45414

New Principal Place of Business:

1620 COLUMBIA AVE
CONNERSVILLE, IN 47331

Current Mailing Address:

1551 WEWATTA STREET
MAIL CODE 90-A4
DENVER, CO 80202

New Mailing Address:

1620 COLUMBIA AVE
CONNERSVILLE, IN 47331

FEI Number: 35-1768429

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 RD.
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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CARROLL, DAVID
Address: 100 KING ST W 6600 11ST CANADIAN PL
City-St-Zip: TORONTO ON, M5X1B8

Title: CFOV () Delete
Name: DISSER, DANIEL
Address: 6450 POE AVE, STE 109
City-St-Zip: DAYTON, OH 45414

Title: AS (X) Delete
Name: SULLIVAN, KATHLEEN A
Address: 1551 WEWATTA ST
City-St-Zip: DENVER, CO 80202

Title: S (X) Delete
Name: PAPPAYLIOU, GEORGE S
Address: 6450 POE AVE, STE 109
City-St-Zip: DAYTON, OH 45414

Title: AS (X) Delete
Name: RUSK, DIANE
Address: 1551 WEWATTA ST
City-St-Zip: DENVER, CO 80202

Title: AS (X) Delete
Name: PROCOPIO, JOSEPH C
Address: 1551 WEWATTA STREET
City-St-Zip: DENVER, CO 80202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BAILEY, MARLON J
Address: 1620 COLUMBIA AVE
City-St-Zip: CONNERSVILLE, IN 47331

Title: TREA (X) Change () Addition
Name: CHAMBERLAIN, JOHN A
Address: 1620 COLUMBIA AVE
City-St-Zip: CONNERSVILLE, IN 47331

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: MARLON J. BAILY

DOF

05/21/2009

Electronic Signature of Signing Officer or Director

Date