2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

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Entity Name: SHERWIN-WILLIAMS AUTOMOTIVE FINISHES CORP.

Current Principal Place of Business:

101 PROSPECT AVE., NW
CLEVELAND, OH 44115

New Principal Place of Business:

Current Mailing Address:

101 PROSPECT AVE., NW
TAX DEPARTMENT
CLEVELAND, OH 44115

New Mailing Address:

FEI Number: 34-1811763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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	( ) Delete
Name:	CONNOR, CHRISTOPHER M	
Address:	101 PROSPECT AVE., NW	
City-St-Zip:	CLEVELAND, OH 44115	
Title:	P	( ) Delete
Name:	LACOUR, BLAIR P	
Address:	101 PROSPECT AVE N W	
City-St-Zip:	CLEVELAND, OH 44115	
Title:	VPS	( ) Delete
Name:	STELLATO, LOUIS E	
Address:	101 PROSPECT AVE., NW	
City-St-Zip:	CLEVELAND, OH 44115	
Title:	VPT	( ) Delete
Name:	HENNESSY, SEAN P	
Address:	101 PROSPECT AVE., NW	
City-St-Zip:	CLEVELAND, OH 44115	
Title:	VPAS	( ) Delete
Name:	CUMMINS, MICHAEL T	
Address:	101 PROSPECT AVE NW	
City-St-Zip:	CLEVELAND, OH 44115	
Title:	VPAT	( ) Delete
Name:	BROGAN, CYNTHIA D	
Address:	101 PROSPECT AVE., NW	
City-St-Zip:	CLEVELAND, OH 44115	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	P	(X) Change ( ) Addition
Name:	HABLITZEL, THOMAS	
Address:	101 PROSPECT AVE N W	
City-St-Zip:	CLEVELAND, OH 44115	
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 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: MICHAEL T CUMMINS VPAS 01/09/2007

Electronic Signature of Signing Officer or Director — Date