FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STA

Sandra B. Mortham

FILED

May 02 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001210 (1)

RUST-OLEUM SALES COMPANY, INC.

Principal Place of Business Mailing Address			· \-				
11 HAWTHORN PKWY VERNON HILLS IL 60061		11 HAWTHORN PKWY VERNON HILLS IL 60061					
					3. Date Incorporated or Qualified 03/08/1996	3a. Date of Las	l Report
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		34-1001661		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	e	City & State	28		Election Campaign Financing Trust Fund Contribution	sing \$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\square\) No		
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registered Agent			
THE	PRENTICE-HALL CORPORATIO	ON SYSTEM, INC.	Bi	Vame			
1201 HAYS STREET				82 Street Address (P.O. Box Number is Not Acceptable)			
SUITE 105			(02)	Silver reduce	(i.e. box ramber is rative explain	0,	
TALLAHASSEE FL 32301			83				
			84 (84 City 85 Zip Code			
				-		FL T	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	s, the above-r	amed corp	oration submits this statement for the pi	rpose of changin	g its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
	Signature, typed or printed name of registered a			signature require	ed when reinstating)	DATE	
12.	OFFICERS AI	ND DIRECTORS DELETE	13.	Y -	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	
TITLE	TELLOR, MICHAEL D		1.1 TITLE			L_I Chang	je [] Abullion
NAME	11 HAWTHORN PKWY		1.2 NAME				
STREET ADDRESS	VERNON HILLS IL 60061		1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	1750		1.4 CITY-ST-ZIP 2.1 HILE			Chang	e Addition
NAME	BARTELT, WILBERT B					Otlani	ic [1] Addition
STREET ADDRESS	11 HAWTHORN PKWY		2.2 NAME 2.3 STREET ADDRESS				
CITY-ST-ZIP	VERNON HILLS IL 60061		2. 4 CITY - \$1 - 7IP				
TITLE	D DELETE		3 1 TITLE	21F		Chang	e Addition
NAME	GILLMANN, STEPHEN J		3.2 NAME				
STREET ADDRESS	11 HAWTHORN PKWY		3.3 STREET ADDRESS				
CITY-ST-ZIP	VERNON HILLS IL 60061		3.4, CHY-S1-7IP				
TITLE	S	DELETE	4.1 TITLE			☐ Chang	e Addition
NAME	GRANZIER, PAUL A		4.2 NAME				
STREET ADDRESS	2628 PEARL RD		4.3 STREET ADDRESS				
CITY-ST-ZIP	MEDINA OH 44256		4 4 CITY-ST-ZIP				Ì
TITLE	1	DELETE	51 TITLE			☐ Chan	je Addition
NAME	Pasha, rasheed		5.2 NAME				
STREET ADDRESS	11 HAWTHORN PKWY		5.3 STREET AD	DRESS			
CITY-ST-ZIP	VERNON HILLS IL 60061		5.4 CITY - S1 - ZIP				
TITLE		DELFTE	6.1 TITLE			☐ Chang	e Addition
NAME			6.2 NAME				Ì
STREET ADDRESS			6.3 STREET AD	DRESS			
				1			1

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attactment with an address.