## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000003943

Entity Name: THE DIAL CORPORATION

FILED Feb 18, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
15501 NORTH DIAL BLVD SCOTTSDALE, AZ 85260 US				19001 N SCOTTSDALE RD STE 4.50 SCOTTSDALE, AZ 85255 US			
					•	, 03	
Current IV	lailing Addres	S:		New Maili	ng Address:		
15501 NORTH DIAL BLVD SCOTTSDALE, AZ 85260 US			19001 N SCOTTSDALE STE 4.50 SCOTTSDALE, AZ 852				
FEI Number	: 51-0374887	FEI Number Applied For()	FEI Num	ber Not Appl	licable ( )	Certificate of Status Des	sired ( )
Name and	d Address of C	urrent Registered Agent:		Name and	Address of No	ew Registered Agen	t:
1201 HAY: TALLAHA: The above	ATION SERVIC S STREET SSEE, FL 3230 e named entity s e of Florida.		ourpose of	changing i	its registered of	fice or registered age	nt, or both,
SIGNATUI	RE:						
	Electroni	c Signature of Registered Age	ent			Date	
	mpaign Financing S AND DIREC	Trust Fund Contribution ( ).  TORS:		ADDITION	IS/CHANGES 1	TO OFFICERS AND	DIRECTORS
Title: Name: Address: City-St-Zip:	PDIR () CASPER, BRAD 15501 NORTH E SCOTTSDALE,	DIAL BLVD		Title: Name: Address: City-St-Zip:	PDIR (X) CASPER, BRAD 19001 N SCOTT SCOTTSDALE, A	SDALE RD	
Title: Name: Address: City-St-Zip:	PAUL, BERRY F	ROOK CROSSING		Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () GAZAWAY, BRA 15501 N DIAL B SCOTTSDALE, A	LVD		Title: Name: Address: City-St-Zip:	VP (X) GAZAWAY, BRA 19001 N SCOTT SCOTTSDALE, A	SDALE RD	
Title: Name: Address: City-St-Zip:	TRES () DOHM, RAPHAE 2200 RENAISSA GULPH MILLS, I	NCE		Title: Name: Address: City-St-Zip:	DOHM, RAPHAE	OOK CROSSING	
Title: Name: Address: City-St-Zip:	DIR () TIERNEY, JOHN 15501 N DIAL B SCOTTSDALE, A	LVD		Title: Name: Address: City-St-Zip:	PICCOLOMINI,	OOK CROSSING	
Title: Name: Address: City-St-Zip:	STARA, FRIEDR HENKELSTRAB			Title: Name: Address: City-St-Zip:	( )	Change ( ) Addition	

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: BRAD GAZAWAY VP 02/18/2009