

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90057 037 ***150.00

DOCUMENT # F99000006438

1. Entity Name
LAARS, INC., A WATER PIK TECHNOLOGIES COMPANY

Principal Place of Business

**6000 CONDER DRIVE
 MOORPARK CA 93021**

Mailing Address

**6000 CONDER DRIVE
 MOORPARK CA 93021**

2. Principal Place of Business

6000 CONDOR DRIVE

Suite, Apt. #, etc.

3. Mailing Address

6000 CONDOR DRIVE

Suite, Apt. #, etc.

City & State

Zip

Country

City & State

Zip

Country

4. FEI Number

52-2195614

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **DP** Delete
 NAME **HOOPIS, MICHAEL P**
 STREET ADDRESS **23 CORPORTATE PLAZA # 246**
 CITY-ST-ZIP **NEWPORT BEACH CA 92660**

TITLE **V** Delete
 NAME **SHORTT, ROBERT A**
 STREET ADDRESS **23 CORPORATE PLAZA # 246**
 CITY-ST-ZIP **NEWPORT BEACH CA 92660**

TITLE **V** Delete
 NAME **BISSON, RICHARD P**
 STREET ADDRESS **23 CORPORATE PLAZA # 246**
 CITY-ST-ZIP **NEWPORT BEACH CA 92660**

TITLE **VCFO** Delete
 NAME **STREUFERT, VICTOR C**
 STREET ADDRESS **23 CORPORATE PLAZA # 246**
 CITY-ST-ZIP **NEWPORT BEACH CA 92660**

TITLE **D** Delete
 NAME **RASP, ROBERT J**
 STREET ADDRESS **6000 CONDOR DR**
 CITY-ST-ZIP **MOORPARK CA 93021**

TITLE **VP** Delete
 NAME **MAIN, SUSAN L**
 STREET ADDRESS **6000 CONDOR DR**
 CITY-ST-ZIP **MOORPARK CA 93021**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/02

Date

805 529-2000
 x252

Daytime Phone #

CR2E034 (9/01)