

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

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P10165 (9)
1. Corporation Name
STANLEY-BOSTITCH, INC.



Principal Place of Business
BRIGGS DRIVE, RT. 2
EAST GREENWICH RI 02818
US

Mailing Address
1000 STANLEY DR
NEW BRITAIN CT 06053
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		05/21/1986	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		05-0419891	
24 Country		29 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 agent and filed applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENKE, BRUCE I.	1.2 NAME	
STREET ADDRESS	BRIGGS DRIVE, RT. 2	1.3 STREET ADDRESS	
CITY-ST-ZIP	E. GREENWICH RI	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, THOMAS J	2.2 NAME	JENNIFER O. ESTABROOK
STREET ADDRESS	1000 STANLEY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRITAIN CT	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUNTER, R.A.	3.2 NAME	T CRAIG A. DOUGLAS
STREET ADDRESS	1000 STANLEY DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRITAIN CT	3.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUCK, RICHARD	4.2 NAME	THERESA F. YERKES
STREET ADDRESS	1000 STANLEY DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRITAIN CT	4.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARTONE, MICHAEL A	5.2 NAME	
STREET ADDRESS	1000 STANLEY DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRITAIN CT	5.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEDDLE, STEPHEN S.	6.2 NAME	SD
STREET ADDRESS	1000 STANLEY DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW BRITAIN CT	6.4 CITY-ST-ZIP	

14. 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 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 attachment with an address.

CR2E034 (10/97)