FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

1995 MAY -1 AM 10:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P10587 (4)

1. Corporation Name
FIRST BRANDS CORPORATION

Principal Place of Business	Mailing Address
TAX DEPARTMENT P. O. BOX 1911 DANBURY, CONNECTICUT 06813-1911	TAX DEPARTMENT P. O. BOX 1911 DANBURY, CONNECTICUT 06813-1911

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/27/1986
3a. Date of Last Report: 03/23/1994

2. Principal Place of Business — 21:
Suite Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 06-1171404 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 title if applicable) (NOTE: Registered Agent signature required when applicable) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CCEO	11 TITLE	☐ Change ☐ Addition
NAME	DUDLEY, A.E.	12 NAME	
STREET ADDRESS	12 JACKSON CT.	13 STREET ADDRESS	100001478231
CITY ST ZIP	RIDGEFIELD CT	14 CITY ST ZIP	-05/08/95--01021--012
TITLE	PCOO	21 TITLE	☐ Change ☐ Addition
NAME	STEPHENSON, W.V.	22 NAME	****200.00 ****200.00
STREET ADDRESS	204 LINDENTREE	23 STREET ADDRESS	
CITY ST ZIP	WILTON CT	24 CITY ST ZIP	
TITLE	VP	31 TITLE	☐ Change ☐ Addition
NAME	ROWLAND, T.H.	32 NAME	
STREET ADDRESS	18 IRONWOOD DRIVE	33 STREET ADDRESS	
CITY ST ZIP	DANBURY CT	34 CITY ST ZIP	
TITLE	VPS	41 TITLE	VICE PRESIDENT / SECRETARY ☑ Change ☐ Addition
NAME	RAYMOND, D.	42 NAME	JOSEPH B. FUREY
STREET ADDRESS	45 BRIAR HILL RD.	43 STREET ADDRESS	9 SULLIVAN FARM
CITY ST ZIP	AVON CT FL	44 CITY ST ZIP	NEW MILFORD, CT 06776
TITLE	T	51 TITLE	SENIOR VICE PRES. AND TREASURER ☑ Change ☐ Addition
NAME	DECECCHIS, L.A.	52 NAME	D.A. DeSANTIS
STREET ADDRESS	98 DEERFIELD LANE NO.	53 STREET ADDRESS	7 HUSSARS CAMP PLACE
CITY ST ZIP	PLEASANTVILLE NY	54 CITY ST ZIP	RIDGEFIELD, CT 06877
TITLE	D	61 TITLE	D ☑ Change ☐ Addition
NAME	MAHER, J.R.	62 NAME	MAHER, J P
STREET ADDRESS	90 RIVERSIDE DRIVE	63 STREET ADDRESS	770 PARK AVE APT 10C
CITY ST ZIP	NEW YORK NY	64 CITY ST ZIP	NEW YORK, N.Y. 10021 SCG 5.1-95

14. I do hereby certify that the information supplied with this filing is accurate and 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 added to the report with an address.

SIGNATURE: Joseph B Furey V/P/S 4-21-95 (203) 731-2463
SIGNATURE AND TYPED OR PRINTED NAME OF BEING OFFICER OR DIRECTOR — Date — Daytime Phone #

0304107 FP