

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

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May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P11827 1. Corporation Name		(3)			
ARMOR ALL PRODUCTS CORPORATION					



Principal Place of Business 6 LIBERTY ONE POST ST. 29TH FLOOR ALISO VIEJO CA 92656 US		Mailing Address C/O MCKESSON CORPORATION ONE POST ST. 29TH FLOOR SAN FRANCISCO CA 94104-5203	
2. Principal Place of Business 21 1221 Broadway, Attn: Tax Dept. Suite, Apt. #, etc.		2a. Mailing Address 26 Attn: Tax Dept. Suite, Apt. #, etc.	
22 City & State Oakland, CA		27 City & State Oakland, CA	
23 Zip 94612		28 Zip 94623	
24 Country USA		30 Country USA	

3. Date Incorporated or Qualified 10/17/1986	3a. Date of Last Report 04/19/1996
4. FEI Number 33-0178217	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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS			
TITLE	PCD	☐ DELETE	
NAME	EVANS, KENNETH M		
STREET ADDRESS	6 LIBERTY		
CITY-ST-ZIP	ALISO VIEJO CA		
TITLE	CD	☐ DELETE	
NAME	MCDOWELL, DAVID E		
STREET ADDRESS	1 POST ST		
CITY-ST-ZIP	SAN FRANCISCO CA		
TITLE	VP	☐ DELETE	
NAME	MCCAFFERTY, MICHAEL		
STREET ADDRESS	6 LIBERTY		
CITY-ST-ZIP	ALISO VIEJO CA		
TITLE	SV	☐ DELETE	
NAME	MILLER, NANCY A		
STREET ADDRESS	ONE POST STREET		
CITY-ST-ZIP	SAN FRANCISCO CA		
TITLE	VT	☐ DELETE	
NAME	METZLER, GAYLE		
STREET ADDRESS	6 LIBERTY		
CITY-ST-ZIP	ALISO VIEJO CA		
TITLE	SVP	☐ DELETE	
NAME	CARON, MICHAEL A.		
STREET ADDRESS	6 LIBERTY		
CITY-ST-ZIP	ALISO VIEJO CA		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	CD	☒ Change	☐ Addition
1.2 NAME	G. E. Johnston		
1.3 STREET ADDRESS	1221 Broadway		
1.4 CITY-ST-ZIP	Oakland CA 94612		
2.1 TITLE	P	☒ Change	☐ Addition
2.2 NAME	L. S. Peiros		
2.3 STREET ADDRESS	1221 Broadway		
2.4 CITY-ST-ZIP	Oakland, CA 94612		
3.1 TITLE	VP	☒ Change	☐ Addition
3.2 NAME	Richard P. Hansen		
3.3 STREET ADDRESS	1221 Broadway		
3.4 CITY-ST-ZIP	Oakland, CA 94612		
4.1 TITLE	VSD	☒ Change	☐ Addition
4.2 NAME	E. A. Cutter		
4.3 STREET ADDRESS	1221 Broadway		
4.4 CITY-ST-ZIP	Oakland, CA 94612		
5.1 TITLE	T	☒ Change	☐ Addition
5.2 NAME	Karen M. Rose		
5.3 STREET ADDRESS	1221 Broadway		
5.4 CITY-ST-ZIP	Oakland, CA 94612		
6.1 TITLE	VD	☒ Change	☐ Addition
6.2 NAME	W. F. Ausfahl		
6.3 STREET ADDRESS	1221 Broadway		
6.4 CITY-ST-ZIP	Oakland, CA 94612		

14. I do 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.

SIGNATURE: *[Signature]* 4/23/97 510-271-7000

CR2E034 (9/96)