## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 16, 2004 8:00 am Secretary of State **DOCUMENT # P22877** 03-16-2004 90026 046 \*\*\*150 00 RECKITT BENCKISER INC. Principal Place of Business Mailing Address 1655 VALLEY ROAD 1655 VALLEY ROAD 14000055 P.O. BOX 943 P.O. BOX 943 WAYNE, NJ 07474-0943 WAYNE, NJ 07474-0943 2. Principal Place of Business 399 Interpace Pkwy 3. Mailing Address 399 Interpace Pkwy Suite, Apt. #, etc. Suite, Apt. #, etc. 03102004 Chg-P CR2E034 (10/03) PO Box 225 PO Box 225 4. FEI Number Applied For City & State City & State 16-1095651 Not Applicable Parsippany, N. <u>Parsippany, N</u> Country Country \$8.75 Additional 5. Certificate of Status Desired 07054-0225 07054-0225 Fee Required - 6. Name and Address of Current Registered Agent - -7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE | Signature, hyped or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when reinstating). | Signature, hyped or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when reinstating). | Signature, hyped or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when reinstating). | Signature required when reinstating are required when representation ar MYASE NO CALLO 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11(19)1900 11. VPGC TITLE K Delete TITLE 5 X Change ☐ Addition GUIDRY, JOHN R NAME Mordan, William 480 LAUREL LANE STREET ADDRESS STREET ADDRESS 399 Interpace Pkwy CITY-ST-ZIP KINNELON, NJ 07405 CITY-ST-ZIP <u>Parsippany, NJ 07054-0225</u> SVP ☐ Delete TITLE President ☐ Addition AHMED, JAVED NAME NAME 399 Interpace Pkwy STREET ADDRESS 1655 VALLEY RD STREET ADDRESS Parsippany, NJ 07054-0225 CITY-ST-ZIP **WAYNE, NJ 07470** CITY-ST-ZIP Delete TITLE TITLE Change Change ☐ Addition CARR, JEFFREY NAME NAME STREET ADDRESS 3 HUNT COURT STREET ADDRESS CITY-ST-ZIP RIDGEFIELD, CT 06877 CITY - ST- ZIP ☐ Delete TITLE X Change FARRELL, TERRACE J NAME Farrell, Terrence NAME STREET ADDRESS 204 GARDNER ROAD STREET ADDRESS 399 Interpace Pkwy RIDGEWOOD, NJ 07450 CITY-ST-ZIP CITY-ST-ZIP Parsippany, NJ 07054-022 TITLE ☐ Delete TITLE ☐ Addition PENNER, ELLIOT J NAME NAME 11 CARRIAGE HOUSE DRIVE STREET ADDRESS STREET ADDRESS 399 Interpace Pkwy SPARTA, NJ 07871 CITY-ST-ZIP CITY-ST-ZIP Parsippany, NJ 07054-0225 Change 19 1 Addition . Delete ŤĮTĹE. TITLE HIBBERT, PHIL NAME NAME 399 Interpace Pkwy 1655 VALLEY RD STREET ADDRESS مغر دياني د ۱۰ تا ۱۳۵۰م STREET ADDRESS a Errus Inc Parsippany, NJ 07054-0225 CITY-ST-ZIP **WAYNE, NJ 07470** CITY-ST-ZIP 12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 3/10/04 (973) 404-2556 SIGNATURE:

FILED