2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2008
Secretary of State

DOCUMENT# P94000058003

Entity Name: SNAP-ON BUSINESS SOLUTIONS (ALISON) INC.

Current Principal Place of Business:

2801 80TH STREET
KENOSHA, WI 53143 US

New Principal Place of Business:

400 SOUTHWEST 7TH STREET
SUITE 100
STUART, FL 34994 US

Current Mailing Address:

2801 80TH STREET
KENOSHA, WI 53143 US

New Mailing Address:

FEI Number: 59-3258421 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D, P ( ) Delete
Name: SIDDONS, MARY BETH
Address: 2801 80TH STREET
City-St-Zip: KENOSHA, WI 53143

Title: VP ( ) Delete
Name: BARACZ, JERRY
Address: 2801 80TH STREET
City-St-Zip: KENOSHA, WI 53143

Title: AS ( ) Delete
Name: JACOBS, MICHAEL
Address: 2801 80TH STREET
City-St-Zip: KENOSHA, WI 53143

Title: T ( ) Delete
Name: KOSTRZEWA, JEFFREY
Address: 2801 80TH STREET
City-St-Zip: KENOSHA, WI 53143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY KOSTRZEWA T 01/18/2008

Electronic Signature of Signing Officer or Director Date