## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000028274

Entity Name: APPLICA CONSUMER PRODUCTS, INC.

FILED Jan 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3633 FLAMINGO ROAD
MIRAMAR, FL 33027

3633 S. FLAMINGO ROAD
MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

3633 FLAMINGO ROAD 3633 S. FLAMINGO ROAD MIRAMAR, FL 33027 MIRAMAR, FL 33027

FEI Number: 65-0659920 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARSTARPHEN, LISA R
3633 FLAMINGO ROAD
MIRAMAR, FL 33027 US
CARSTARPHEN, LISA R
3633 S. FLAMINGO ROAD
MIRAMAR, FL 33027 US

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: /S/ LISA R. CARSTARPHEN 01/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

DCEO () Delete

Name: POLISTINA, TERRY L Address: 3633 FLAMINGO ROAD City-St-Zip: MIRAMAR, FL 33027

Title:

Title: VPS ( ) Delete
Name: CARSTARPHEN, LISA R
Address: 3633 FLAMINGO ROAD
City-St-Zip: MIRAMAR, FL 33027

Title: CFO () Delete Name: HABIBE, IVAN

Address: 3633 FLAMINGO ROAD City-St-Zip: MIRAMAR, FL 33027

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change ( ) Addition

Name: POLISTINA, TERRY L
Address: 3633 S. FLAMINGO ROAD
City-St-Zip: MIRAMAR, FL 33027

Title: VPS (X) Change ( ) Addition

Name: CARSTARPHEN, LISA R Address: 3633 S. FLAMINGO ROAD City-St-Zip: MIRAMAR, FL 33027

Title: CFO (X) Change ( ) Addition

Name: HABIBE, IVAN

Address: 3633 S. FLAMINGO ROAD City-St-Zip: MIRAMAR, FL 33027

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: /S/ LISA R. CARSTARPHEN VPS 01/15/2009