

|                                                                                                                                                        |                              |                                                                                                                                                                                        |             |                                                                            |         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------|---------|
| No. <b>W 47202</b>                                                                                                                                     |                              | <b>Due no later than Feb 29, 2012</b>                                                                                                                                                  |             | 2. Registered Agent and Address <b>(NO PO BOX)</b>                         |         |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                              | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>STANLEY ACCESS TECHNOLOGIES LLC<br>1000 STANLEY DRIVE<br>NEW BRITAIN CT 06053<br>USA |             | CT CORPORATION SYSTEM<br>1111 W JEFFERSON STE 530<br>BOISE ID 83702<br>USA |         |
|                                                                                                                                                        |                              |                                                                                                                                                                                        |             | 3. <u>New</u> Registered Agent Signature:*                                 |         |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.                                                           |                              |                                                                                                                                                                                        |             |                                                                            |         |
| Office Held                                                                                                                                            | Name                         | Street or PO Address                                                                                                                                                                   | City        | State                                                                      | Country |
| MEMBER                                                                                                                                                 | STANLEY BLACK & DECKER, INC. | 1000 STANLEY DR                                                                                                                                                                        | NEW BRITAIN | CT                                                                         | USA     |
| Postal Code<br>06053                                                                                                                                   |                              |                                                                                                                                                                                        |             |                                                                            |         |
| 5. Organized Under the Laws of:<br><br><b>DE<br/>W 47202</b>                                                                                           |                              | 6. Annual Report must be signed.*<br>Signature: Dareth Jeffers<br>Name (type or print): Dareth Jeffers<br>Date: 01/20/2012<br>Title: Poa                                               |             |                                                                            |         |
| Processed 01/20/2012                                                                                                                                   |                              | * Electronically provided signatures are accepted as original signatures.                                                                                                              |             |                                                                            |         |