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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90190 012 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 838210

1. Corporation Name
MACDERMID, INCORPORATED

Principal Place of Business 245 FREIGHT STREET WATERBURY CT 06702-1802	Mailing Address 245 FREIGHT STREET WATERBURY CT 06702-1802
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 04/13/1977
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 06-0435750
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
24. Country	29. Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name
 82. Street Address (P.O. Box Number is Not Acceptable)
 83.
 84. City **FL** 85. Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEEVER, DANIEL H.	1.2 NAME	See attached list
STREET ADDRESS	135 RAILTREE HILL RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	WOODBURY CT	1.4 CITY-ST-ZIP	
TITLE	COB <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEEVER, HAROLD	2.2 NAME	
STREET ADDRESS	366 GUILDS HOLLOW RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BETHLEHEM CT	2.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEEVER, DANIEL H.	3.2 NAME	
STREET ADDRESS	135 RAILTREE HILL RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WOODBURY CT	3.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORDANI, JOHN L.	4.2 NAME	
STREET ADDRESS	26 RICHARD AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	WOLCOTT CT	4.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVETERE, JR A	5.2 NAME	
STREET ADDRESS	277 CHARTER OAK	5.3 STREET ADDRESS	
CITY-ST-ZIP	SOUTHBURY CT	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** *4-6-99* (203) 575-5700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)

838210
447849-90190-12

MACDERMID INCORPORATED

OFFICERS OF THE CORPORATION

Title	Name	Address
* Chairman Emeritus	* Harold Leever	366 Guilds Hollow Rd., Bethlehem, CT 06751
* Chairman & CEO	* Daniel H. Leever	135 Railtree Hill Rd., Woodbury, CT 06798
* President & COO	* R. Nelson Griebel	7 Karyn Lane, Simsbury, CT 06089
Vice President of Finance	Stephen Largan	245 Freight St., Waterbury, CT 06702
Secretary & General Counsel	John L. Cordani	26 Richard Ave., Wolcott, CT 06716
Corporate Controller	Gregory M. Bolingbroke	3 Fox Run, Woodbury, CT 06798

(The Business Address for each Officer is 245 Freight Street, Waterbury, CT 06702)

DIRECTORS OF THE CORPORATION

Donald G. Ogilvie	B - American Bankers Association, 1120 Connecticut Ave., N.W., Washington, DC 20036 (Executive Vice President R - RFD 900, Vineyard Haven, MA 02568
James C. Smith	B - Webster Financial Corporation, 145 Bank Street, Waterbury, CT 06702 (President & CEO) R - 33 Birchwood Terrace, Middlebury, CT 06762
Thomas W. Smith	B - Prescott Investors, Inc., 323 Railroad Ave., Greenwich, CT 06830 (President) R - 15 Winding Lane, Greenwich, CT 06830

Use Business Address for all Mailings

* Also serves as Directors of the Corporation B - Business Address R - Residence Address