

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006935

Entity Name: ICL PERFORMANCE PRODUCTS INC.

Current Principal Place of Business:

1105 NORTH MARKET STREET
SUITE 1300
WILMINGTON, DE 19801

Current Mailing Address:

1105 NORTH MARKET STREET
SUITE 1300
WILMINGTON, DE 19801

FEI Number: 01-0847132

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name VOLMER, MARK
Address 622 EMERSON ROAD, SUITE 500
City-State-Zip: CREVE COEUR MO 63141

Title SECRETARY
Name REPASO, ANTHONY J
Address 622 EMERSON ROAD, SUITE 500
City-State-Zip: CREVE COEUR MO 63141

Title P
Name MOFFATT, JAMES R
Address 622 EMERSON ROAD, SUITE 500
City-State-Zip: CREVE COEUR MO 63141

Title TCFO
Name SCHLESSMAN, PAUL M
Address 622 EMERSON ROAD, SUITE 500
City-State-Zip: CREVE COEUR MO 63141

Title ASST. TREASURER
Name NAGEL, DEBORAH J
Address 622 EMERSON ROAD, SUITE 500
City-State-Zip: CREVE COEUR MO 63141

Title VP
Name COREY, NINA A
Address 1105 N MARKET ST SUITE 1300
City-State-Zip: WILMINGTON DE 19801

Title ASST. SECRETARY
Name SAMPLE, ANNE M
Address 1105 NORTH MARKET STREET
SUITE 1300
City-State-Zip: WILMINGTON DE 19801

Title OFFICER
Name SHROFF, VIJAY J
Address 622 EMERSON ROAD SUITE 500
SUITE 500
City-State-Zip: CREVE COEUR MO 63141

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH NAGEL

ASSISTANT TREASURER 04/22/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name LUEDKE, WAYNE R
Address 622 EMERSON ROAD
 SUITE 500
City-State-Zip: CREVE COEUR MO 63141