


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # F05000006935 1. Entity Name ICL PERFORMANCE PRODUCTS INC.	
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Principal Place of Business 3411 SILVERSIDE RD 103 SPRINGER BLDG WILMINGTON, DE 19810	Mailing Address 3411 SILVERSIDE RD 103 SPRINGER BLDG WILMINGTON, DE 19810
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DO NOT WRITE IN THIS SPACE



01232007 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0847132	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KENNEDY, RICHARD V JR 3411 SILVERSIDE RD 103 SPRINGER BLD WILMINGTON, DE 19810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KAIMAN, JAMES J 3411 SILVERSIDE RD 103 SPRINGER BLD WILMINGTON, DE 19810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ASHTON, ROBERT J 3411 SILVERSIDE RD 103 SPRINGER BLD WILMINGTON, DE 19810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCFO SCHLESSMAN, PAUL M 3411 SILVERSIDE RD 103 SPRINGER BLD WILMINGTON, DE 19810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COREY, NINA A 3411 SILVERSIDE RD 103 SPRINGER BLD WILMINGTON, DE 19810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/16/07-80033-002 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nina A. Corey 4/25/07 302-478-6160
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #