## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## DOCUMENT # F96000002868 May 17, 2000 8:00 am Secretary of State 1. Entity Name IMC CHEMICALS INC. 05-17-2000 90952 048 \*\*\*158.75 Principal Place of Business Mailing Address 8300 COLLEGE BLVD. 8300 COLLEGE BLVD. OVERLAND PARK KS 66210-1841 OVERLAND PARK KS 66210 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 13-3579263 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. VPAS ... ☐ Change ☐ Addition ☐ Delete TITLE TITLE DOWD, MATTHEW J NAME NAME STREET ADDRESS 399 PARK AVE. - 32ND FL STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP NEW YORK FL 10022 ■ Addition ☐ Change ☐ Delete TITLE TANCREDI, JOHN F NAME 8300 COLLEGE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OVERLAND PARK KS CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE FERRALL, PAUL NAME-STREET ADDRESS 8300 COLLEGE BLVD STREET ADDRESS **OVERLAND PARK KS 66210** CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE RANDOLPH, SCOTT NAME NAME STREET ADDRESS STREET ADDRESS 8300 COLLEGE BLVD CITY-ST-ZIP CITY-ST-ZIP OVERLAND PARK KS 66210 ☐ Delete ☐ Change Addition TITLE TITLE DUNN, PAUL E JR NAME NAME 2100 SANDERS RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NORTHBROOK IL 60062-6146 Secretory Change ☐ Addition TITLE ☐ Delete TITLE WILLIAMS, ROSE M NAME STREET ADDRESS STREET ADDRESS 2100 SANDERS RD CITY-ST-ZIP CITY-ST-ZIP NORTHBROOK IL 60062-6146 13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.