


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # F96000005836

1. Entity Name
DARLING INTERNATIONAL INC.



Principal Place of Business
251 O'CONNOR RIDGE BOULEVARD
SUITE 300
IRVING, TX 75038

Mailing Address
251 O'CONNOR RIDGE BOULEVARD
SUITE 300
IRVING, TX 75038



04102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-2495346 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

8. 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, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO MUSE, JOHN 251 O'CONNOR RIDGE BLVD STE 300 IRVING, TX 75038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KILANOWSKI, MITCHELL 251 O'CONNOR RIDGE BOULEVARD, SUITE 300 IRVING, TX 75038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KATCHEN, NEIL 251 O'CONNOR RIDGE BOULEVARD, SUITE 300 IRVING, TX 75038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCMURTRY, WILLIAM R 251 O'CONNOR RIDGE BOULEVARD, SUITE 300 IRVING, TX 75038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PHILLIPS, BRAD 251 O'CONNOR RIDGE BOULEVARD, SUITE 300 IRVING, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HINERMAN, ROBERT 251 O'CONNOR RIDGE BLVD STE 300 IRVING, TX 75038

U00000529352
 05/05/06-80072-025 150.00

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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: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

972-717-0300