

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **810056**

(2)

1. Corporation Name

THE DOW CHEMICAL COMPANY



Principal Place of Business

**2030 DOW CENTER
MIDLAND MICHIGAN 48640**

Mailing Address

**2030 DOW CENTER
MIDLAND MICHIGAN 48640**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

3. Date Incorporated or Qualified

10/28/1954

3a. Date of Last Report

05/01/1995

4. FEI Number

38-1285128

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

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

Signature typed or printed name of officer, agent, and the actual filer

(If CIL Registered Agent, Signature is not required)

DATE

12. OFFICERS AND DIRECTORS

TITLE	AS	☐ DELETE
NAME	HAHN, C J	
STREET ADDRESS	2030 DOW CENTER	
CITY- ST- ZIP	MIDLAND MI	
TITLE	T	☐ DELETE
NAME	REINHARD, J. PEDRO	
STREET ADDRESS	2030 DOW CENTER	
CITY- ST- ZIP	MIDLAND MI	
TITLE	PD	☒ DELETE
NAME	POPOFF, P FRANK	
STREET ADDRESS	2030 DOW CENTER	
CITY- ST- ZIP	MIDLAND MI	
TITLE	S	☐ DELETE
NAME	ROBERTS, J DONNA	
STREET ADDRESS	2030 DOW CENTER	
CITY- ST- ZIP	MIDLAND MI	
TITLE	V	☐ DELETE
NAME	FALLA, E.C.	
STREET ADDRESS	2030 DOW CENTER	
CITY- ST- ZIP	MIDLAND MI	
TITLE	AT	☐ DELETE
NAME	KAHN, H	
STREET ADDRESS	2030 DOW CENTER	
CITY- ST- ZIP	MIDLAND MI	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY- ST- ZIP	
2. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY- ST- ZIP	
3. TITLE	☐ Change ☒ Addition
32. NAME	President
33. STREET ADDRESS	Stavropoulos, W. S.
34. CITY- ST- ZIP	
4. TITLE	☐ Change ☐ Addition
42. NAME	
43. STREET ADDRESS	
44. CITY- ST- ZIP	
5. TITLE	☐ Change ☐ Addition
52. NAME	
53. STREET ADDRESS	
54. CITY- ST- ZIP	
6. TITLE	☐ Change ☐ Addition
62. NAME	
63. STREET ADDRESS	
64. CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

C. J. Hahn, Asst Secretary 4/26/96 517-636-1270

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034 (12/95)