## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 810056

THE DOW CHEMICAL COMPANY

Principal	Place	of	Busines
2020 DOW	CENT	CC	,

MIDLAND MI 48640

Mailing Address

2030 DOW CENTER MIDLAND MI 48640

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90075 032 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

						3. Date Incorporated or Qualifed 10/28/1954					
2 Principal Di	Principal Place of Business 2a. Mailing Address			4. FEI Number	TA	pplied For					
						38-1285128	-	ot Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					8.75	Additional lequired			
22		City & State				A Florito Comprise Signature					
City & State	e	28	<u>.</u>			6. Election Campaign Financing Trust Fund Contribution	-	May Be to Fees			
Zip	Country Zip Country			8. This corporation owes the current year Intangible Personal Property Tax.							
24 25 29 30 30 9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
	or right and reservoir			81	Name						
CT CORPORATION SYSTEM											
1200 S. PINE ISLAND ROAD				82 Street Address (P.O. Box Number is Not Acceptable)							
	NTATION FL 33324			83							
							_r				
				84	City	FI <sup> {</sup>	35 Zip	Code			
11 Dumana-1	to the provisions of Sections 507 050	2 and 607 1508 Florida S	tatutes the al	L	a-named co	progration submits this statement for the purpose of cha	ngina it	s registered			
office or n	egistered agent, or both, in the State o	of Florida. Such change w	as autnonzed	ιру	tne corpora	ation's board of directors. I hereby accept the appointm	ent as n	egistered			
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505	, Florida Statu	ites.							
SIGNATURE			MATE B. MANA	_		ized when reinstating) DATE					
	Signature, typed or printed name of registered agen OFFICERS AN		13.	Agen	t signatura requ	ADDITIONS/CHANGES TO OFFICERS AND I	DIRECT	ORS IN 12			
12.		□ DELET		n =	<del></del>		Change	☐ Addition			
TITLE	AS										
NAME	134,14, 00		1	1.2 NAME 1.3 STREET ADDRESS							
STREET ADDRESS	2030 DOW CENTER										
CITY-ST-ZIP	MIDLAND MI		1.4 CF		r-ZIP		Change	Addition			
TITLE	T	☐ DELET					) Orlange				
NAME	MERSZEI, G		2.2 NA								
STREET ADDRESS	2030 DOW CENTER		2.3 \$1	REET	ADDRESS						
CITY-ST-ZIP	MIDLAND MI 48674		2.4 C		T-ZIP		101	C Addition			
TITLE	P	☐ DELET	E 3.1 ™	ΠE		L	] Change	Addition			
NAME	STAVROPOULOS, W.S.		3.2 NA	ME							
STREET ADDRESS	2030 DOW CENTER		3.3 ST	REET	ADDRESS						
CITY-ST-ZIP	MIDLAND MICHIGAN MI 48640		3.4. C	ITY-S	T-ZIP		1.0				
TITLE	S □ DELETE 4:		E 4.1 TII	ΓLE			] Change	Addition			
NAME	SCRIVEN, J G		4. 2 N	AME							
STREET ADDRESS	2030 DOW CENTER		4.3 ST	REET	ADDRESS						
CITY-ST-ZIP	MIDLAND MI 48640		4.4 CI	TY-SI	r-ZIP						
TITLE	V □ DELETE			5.1 TITLE			] Change	Addition			
NAME	FALLA, E.C.		5.2 NA	5.2 NAME		WASHINGTON, L. J.					
STREET ADDRESS	2030 DOW CENTER		5.3 ST	REET	ADDRESS						
CITY-ST-ZIP	MIDLAND MI		5.4 CF		r-21P						
TITLE			6.1 TI	TLE	-		] Change	☐ Addition			
NAME	RUIZ, F		6.2 NA	WE	1			•			
STREET ADDRESS	2030 DOW CENTER		6.3 ST	REET	ADDRESS						
CITY-ST-ZIP	MIDLAND MI 48640		6.4 CF								
14. I hereby	pertify that the information supplied with	h this filing does not quali	fy for the exe	mpti	on stated it	Section 119.07(3)(i), Florida Statutes. I further certify	that the	information			

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, with all other like empowered.

arles J. Hann, Asst. Secretary

4/28/99 (517-636-1270)