

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90080 007 ***150.00

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DOCUMENT # 838210
 1. Entity Name
MACDERMID, INCORPORATED

Principal Place of Business 245 FREIGHT STREET WATERBURY CT 06702-1802	Mailing Address 245 FREIGHT STREET WATERBURY CT 06702-1802
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 06-0435750	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD LEEVEER, DANIEL H. 135 RAILTREE HILL RD WOODBURY CT <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COBD LEEVEER, HAROLD 366 GUILDS HOLLOW RD. BETHLEHEM CT <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRIEBEL, NELSON R 7 KARYN LANE SIMSBURY CT 06089 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Michael Sigmund 1 Jofran Lane Greenwich, CT 06830 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CORDANI, JOHN L. 26 RICHARD AVE. WOLCOTT CT <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Mary Anne Tillona 57 Farmington Ridge Dr. Farmington, CT 06032 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOLINGBROKE, GREGORY M 61 OLD GRASSY HILL RD WOODBURY CT 06798 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, CC&T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LARGAN, STEPHEN 123 LORELEI COURT SOUTHBURY CT 06488 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6 Bear Burrow Road Roxbury, CT 06783

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 an other like empowered.

SIGNATURE: Mary Anne Tillona **(203) 575-5700**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment

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838210

MACDERMID INCORPORATED

OFFICERS OF THE CORPORATION

Title	Name	Address
*Chairman & CEO	* Daniel H. Leever	245 Freight Street, Waterbury, CT 06702
Executive Vice President	Michael Siegmund	1 Jofran Lane, Greenwich, CT 06830
Corporate Secretary	Mary Anne Tillona	57 Farmington Ridge Dr., Farmington, CT 06032
VP, Corporate Controller & Treasurer	Gregory M. Bolingbroke	61 Old Grassy Hill Rd., Woodbury, CT 06798
Vice President of Finance	Stephen Largan	6 Bear Burrow Road, Roxbury, CT 06783

(The Business Address for each Officer is 245 Freight Street, Waterbury, CT 06702)

DIRECTORS OF THE CORPORATION

Donald G. Ogilvie	B - American Bankers Association, 1120 Connecticut Ave., N.W. Washington, DC 20036 (Executive Vice President) R - RFD 900, Vineyard Haven, MA 02568
James C. Smith	B - Webster Financial Corporation, 145 Bank Street, Waterbury, CT 06702 (President & CEO) R - 33 Birchwood Terrace, Middlebury, CT 06762
Joseph Silvestri	R - Citycorp Venture Capital, Ltd., 399 Park Ave., 14 th Fl./Zone 4 New York, NY 10043

Use Business Address for all Mailings

B - Business Address R - Residence Address

* Also serves as Directors of the Corporation