

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 11, 2001 8:00 am**  
**Secretary of State**

04-11-2001 90104 012 \*\*\*150.00

05/85/18

**DOCUMENT # F92000000716**

1. Entity Name  
**ICI AMERICAS INC.**

Principal Place of Business  
**10 FINDERNE AVENUE  
 BRIDGEWATER NJ 08807**

Mailing Address  
**CONCORD PLAZA  
 3411 SILVERSIDE RD. P.O. BOX 15391  
 WILMINGTON DE 19850**

**50029339**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address  
**3411 SILVERSIDE RD.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
**P.O. BOX 8340**

City & State

City & State  
**WILMINGTON, DE**

4. FEI Number **51-0300634**

Applied For  
 Not Applicable

Zip

Country

Zip  
**19803-8340**

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
 8751 W. BROWARD BLVD.  
 PLANTATION FL 33324**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.  (See criteria on back)

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	DANZEISEN, JOHN R	
STREET ADDRESS	3411 SILVERSIDE RD.	
CITY-ST-ZIP	WILMINGTON DE 19850	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	KENT, RIEGEL J	
STREET ADDRESS	3411 SILVERSIDE RD.	
CITY-ST-ZIP	WILMINGTON DE 19850	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	ALLES, JAMES A	
STREET ADDRESS	3411 SILVERSIDE RD.	
CITY-ST-ZIP	WILMINGTON DE	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MCMILLIAN, ROSS H	
STREET ADDRESS	3411 SILVERSIDE ROAD	
CITY-ST-ZIP	WILMINGTON DE	
TITLE	VD	<input type="checkbox"/> Delete
NAME	JOHNSON, PETER W	
STREET ADDRESS	3411 SILVERSIDE RD.	
CITY-ST-ZIP	WILMINGTON DE	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	ROSS, GORDON L	
STREET ADDRESS	3411 SILVERSIDE RD	
CITY-ST-ZIP	WILMINGTON DE	

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	WILMINGTON, DE 19803-8340	
CITY-ST-ZIP		
TITLE	VP/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RANSOM, ANDREW M.	
STREET ADDRESS	3411 SILVERSIDE ROAD	
CITY-ST-ZIP	WILMINGTON, DE 19803-8340	
TITLE	D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ABWELL, WILLIAM H.	
STREET ADDRESS	3411 SILVERSIDE ROAD	
CITY-ST-ZIP	WILMINGTON, DE 19803-8340	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>WRIGHT, DENIS F.</del> IAN McMAHON	
STREET ADDRESS	3411 SILVERSIDE ROAD	
CITY-ST-ZIP	WILMINGTON, DE 19803-8340	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	WILMINGTON, DE 19803-8340	
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZOMER, LOUIS J.	
STREET ADDRESS	3411 SILVERSIDE ROAD	
CITY-ST-ZIP	WILMINGTON, DE 19803-8340	

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.

SIGNATURE: \_\_\_\_\_

*B.S. Curran*

**B.S. CURRAN**

1/19/01

302-887-8579

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ASST. SECRETARY Date Daytime Phone #

CR2E034 (10/00)

Attachment  
D# F92000000716  
B0029339

ICI AMERICS INC.  
DOCUMENT #F92000000716

ADDITIONAL OFFICERS

V

Forrest, R. John  
3411 Silverside Road  
Wilmington, DE 19810

T

Brownlee, R. Timothy  
3411 Silverside Road  
Wilmington, DE 19810

AS

Curran, Barbara S.  
3411 Silverside Road  
Wilmington, DE 19810

AS

Hutchinson, William J.  
3411 Silverside Road  
Wilmington, DE 19810

AT

Finlan, Thomas A.  
3411 Silverside Road  
Wilmington, DE 19810

Please note: Correct zip code is 19803-8340.