


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

<b>DGCUMENT # F93000003026</b> 1. Entity Name LUCITE INTERNATIONAL INC.	
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Principal Place of Business AMERICAS OPERATIONS & RESEARCH CENTER 7275 GOODLETTS FARM PARKWAY CORDOVA TN 38016-4909 US	Mailing Address AMERICAS OPERATIONS & RESEARCH CENTER 7275 GOODLETTS FARM PARKWAY CORDOVA TN 38016-4909 US
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2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip
		Country



1st MOORE CR2E034 (10/05)

4. FEI Number **43-0625543**  Applied For Not Applicable

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

6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM</b> <b>1200 SOUTH PINE ISLAND ROAD</b> <b>PLANTATION FL 33324</b>	7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ State <b>FL</b> 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reconstituting) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	CCO	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	DAVIS, JEFF			NAME			
STREET ADDRESS	7275 GOODLETT FARMS PKWY			STREET ADDRESS			
CITY-ST-ZIP	CORDOVA TN 38016			CITY-ST-ZIP			
TITLE	VPF	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	LONG, BRENT			NAME			
STREET ADDRESS	7275 GOODLETT FARMS PKWY			STREET ADDRESS			
CITY-ST-ZIP	CORDOVA TN 38016			CITY-ST-ZIP			
TITLE	ATC	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	GANEY, RICHARD G.			NAME			
STREET ADDRESS	7275 GOODLETT FARMS PKWY			STREET ADDRESS			
CITY-ST-ZIP	CORDOVA TN 38016			CITY-ST-ZIP			
TITLE	AS	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	MILLS, ELIZABETH			NAME			
STREET ADDRESS	7275 GOODLETT FARMS PKWY			STREET ADDRESS			
CITY-ST-ZIP	CORDOVA TN 38016			CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	ANANTHAKRISNNAN, ANDY			NAME			
STREET ADDRESS	7275 GOODLETT FARMS PKWY			STREET ADDRESS			
CITY-ST-ZIP	CORDOVA TN 38016			CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add	
NAME	SKINTA, TOM			NAME			
STREET ADDRESS	7275 GOODLETT FARMS PKWY			STREET ADDRESS			
CITY-ST-ZIP	CORDOVA TN 38016			CITY-ST-ZIP			

U00000513559  
04/29/06-80130-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Richard Ganev - Richard Ganev 4-10-06 901-381-2231