2001 UNIFORM BUSINESS REPORT (UBR) 801295 May 02, 2001 8:00 am Secretary of State DOČUMENT# 1. Entity Name HERCULESDINCORPORATED 05-02-2001 90174 014 \*\*\*150.00 Principal Place of Business Mailing Address Hercules Plaza Hercules Plaza 1313 N. Market St. 1313 N. Market Street Wilmington, DE 19894-0001 Wilmington, DE 19894-0001 C0057387 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4 FEL Number Not Applicable 51-0023450 Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road Plantation, FL 33324 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees П Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition TITLE **VP** Tax ☐ Delete TITLE NAME NAME Bruce W. Jester STREET ADDRESS STREET ADDRESS 210 Deergrass Road CITY-ST-ZIP CITY-ST-ZIP Hockessin, DE 19707 Change ☐ Addition TITLE ☐ Delete NAME Thomas L. Gossage STREET ADDRESS STREET ADDRESS 1313 N. Market Street Wilm., DE 19894-0001 CITY-ST-ZIP CITY-ST-ZIP Addition Change Secretary ☐ Delete TITLE TITLE NAME NAME Israel J. Floyd STREET ADDRESS STREET ADDRESS 5 Blueberry Court CITY-ST-ZIP CITY-ST-ZIP Hockessin, DE 19707 Change Addition ☐ Delete TITLE Treasurer NAME NAME Stuart C. Shears STREET ADDRESS STREET ADDRESS 427 Marlboro Road CITY-ST-ZIP CITY-ST-ZIP <u>Kennett Square, PA 19358</u> Change Addition TITLE Vice Chairman ☐ Delete TITLE NAME NAME George W. McKenzie STREET ADDRESS STREET ADDRESS 360 High Ridge Road CITY-ST-ZIP CITY-ST-ZIP Chadds Ford, PA 19 Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

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.

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

BWERTE

√Bruce W. Jester, VP Tax

5/5/01 3022594-5235

Date

Daytime Phone #