2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006
Secretary of State

DOCUMENT# 801275

Entity Name: HERCULES INCORPORATED

Current Principal Place of Business:

HERCULES PLAZA
1313 N. MARKET ST.
WILMINGTON, DE 198940001

New Principal Place of Business:

HERCULES PLAZA
1313 N. MARKET ST.
WILMINGTON, DE 19894

Current Mailing Address:

HERCULES PLAZA
1313 N. MARKET ST.
WILMINGTON, DE 198940001

New Mailing Address:

HERCULES PLAZA
1313 N. MARKET ST.
WILMINGTON, DE 19894

FEI Number: 51-0023450 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VPTA ( ) Delete
Name: ROMANO, VINCENZO
Address: 207 HARVEST LANE
City-St-Zip: BROOMALL, PA 19008 US

Title: PRES ( ) Delete
Name: ROGERSON, CRAIG
Address: 1313 N MARKET STREET
City-St-Zip: WILMINGTON, DE 19894

Title: S ( ) Delete
Name: FLOYD, ISRAEL J
Address: 5 BLUEBERRY COURT
City-St-Zip: HOCKESSIN, DE 19707

Title: T ( ) Delete
Name: SHEARS, STUART C
Address: 427 MARLBORO ROAD
City-St-Zip: KENNETT SQUARE, PA 19358

Title: VPC ( ) Delete
Name: AANONSEN, FRED G
Address: 1313 N MARKET STREET
City-St-Zip: WILMINGTON, DE 19894

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VINCENZO ROMANO VPTA 03/24/2006

Electronic Signature of Signing Officer or Director — Date