

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90057 036 ***150.00

DOCUMENT # **815654**

1. Corporation Name
ECOLAB INC.

Principal Place of Business

TAX DEPARTMENT
 ECOLAB CENTER
 ST. PAUL MN 55102

Mailing Address

TAX DEPARTMENT
 ECOLAB CENTER
 ST. PAUL MN 55102

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/04/1961

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

24

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

29

Zip

Country

30

4. FEI Number

41-0231510

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida; Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	T	<input type="checkbox"/> DELETE
NAME	FRITZE, STEVEN	
STREET ADDRESS	ECOLAB CENTER	
CITY-ST-ZIP	ST. PAUL MN	
TITLE	V	<input type="checkbox"/> DELETE
NAME	FORSYTHE, JOHN G.	
STREET ADDRESS	ECOLAB CENTER	
CITY-ST-ZIP	ST. PAUL MN	
TITLE	S	<input type="checkbox"/> DELETE
NAME	IVERSON, KENNETH	
STREET ADDRESS	ECOLAB CENTER	
CITY-ST-ZIP	ST. PAUL MN	
TITLE	VC	<input checked="" type="checkbox"/> DELETE
NAME	SHANNON, MICHAEL	
STREET ADDRESS	ECOLAB CENTER	
CITY-ST-ZIP	ST. PAUL MN	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	SCHUMAN, ALLAN	
STREET ADDRESS	ECOLAB CENTER	
CITY-ST-ZIP	ST. PAUL MN	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
4.2 NAME	President & CEO
4.3 STREET ADDRESS	Deschamps, Bruno
4.4 CITY-ST-ZIP	Ecolab Center St. Paul, MN 55102
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same 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; that I am a resident of this state; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like entries.

SIGNATURE:

John M. ...

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #