

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 815654

Entity Name: ECOLAB INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

TAX DEPARTMENT
ECOLAB CENTER
ST. PAUL, MN 55102

New Principal Place of Business:

370 WABASHA STREET NORTH
ST. PAUL, MN 55102 US

Current Mailing Address:

TAX DEPARTMENT
ECOLAB CENTER
ST. PAUL, MN 55102

New Mailing Address:

ASSISTANT SECRETARY
370 WABASHA STREET NORTH
ST. PAUL, MN 55102 US

FEI Number: 41-0231510

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: T () Delete
Name: CORKREAN, JOHN
Address: ECOLAB CENTER
City-St-Zip: SAINT PAUL, MN 55102

Title: V () Delete
Name: JOHNSON, PATRICIA
Address: ECOLAB CENTER
City-St-Zip: ST. PAUL, MN

Title: S () Delete
Name: BELL, LAWRENCE T
Address: ECOLAB CENTER
City-St-Zip: SAINT PAUL, MN 55102

Title: CFO () Delete
Name: FRITZE, STEVEN
Address: ECOLAB CENTER
City-St-Zip: SAINT PAUL, MN 55102

Title: PD () Delete
Name: DOUGLAS, BAKER
Address: ECOLAB CTR
City-St-Zip: SAINT PAUL, MN 55102

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: CORKREAN, JOHN
Address: 370 WABASHA STREET NORTH
City-St-Zip: SAINT PAUL, MN 55102 US

Title: AS (X) Change () Addition
Name: DUVICK, DAVID
Address: 370 WABASHA STREET NORTH
City-St-Zip: ST. PAUL, MN 55102 US

Title: S (X) Change () Addition
Name: BELL, LAWRENCE T
Address: 370 WABASHA STREET NORTH
City-St-Zip: SAINT PAUL, MN 55102 US

Title: CFO (X) Change () Addition
Name: FRITZE, STEVEN
Address: 370 WABASHA STREET NORTH
City-St-Zip: SAINT PAUL, MN 55102 US

Title: PD (X) Change () Addition
Name: BAKER, DOUGLAS
Address: 370 WABASHA STREET NORTH
City-St-Zip: SAINT PAUL, MN 55102 US

Title: AS () Change (X) Addition
Name: MCCORMICK, MICHAEL
Address: 370 WABASHA STREET NORTH
City-St-Zip: SAINT PAUL, MN 55102 US

I hereby certify that the information supplied with this filing does not qualify 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: DAVID DUVICK

AS

04/29/2009

Electronic Signature of Signing Officer or Director

Date