FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 819525

(7)

OLIN MICROELECTRONIC CHEMICALS, INC.

FILED Apr 28 1997 8:00am Secretary of State



Dringles Dis	no of Business	Mailing Addisses				
Principal Place of Business 501 MERRIT 7 NORWALK CT 06856-4500 US		Mailing Address P.O.80X 4500 NORWALK CT 06856-4500 US				
00		00			3. Date Incorporated or Qualified 04/25/1966	3a. Date of Last Report 02/06/1996
		2a. Mailing Address	iling Address		4. FEI Number	Applied Fo
21 Suite, Apt	# otc	Suite, Apt #, etc.			22-1482879	Not Applie
City & State		27 City & State			5. Certificate of Status Desired See Required Fee Required	
					6. Election Campaign Financing \$5.00 May Be	
23	Country	28		· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country		8. This corporation has liability for	
[24]	25 9. Name and Address of Curren	29 30 N Registered Agent	<u> </u>		Florida Statutes 10. Name and Address of New Re	Yes No
CT (CORPORATION SYSTEM		81	Name	10. Hambard Products of Note Inc	giotorou Agoin
) S. PINE ISLAND ROAD		-	0		· · · · · · · · · · · · · · · · · · ·
	NTATION FL 33324		82	Street A	ddress (P.O. Box Number is Not Acceptat	olo)
,,,,			83			
			84	Cily		85 Zip Code
						FL '
office or agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered ag	ations of, Section 607.0505, Florid	ta Statute:	š.	corporation submits this statement for the paration's board of directors. I hereby acce	ot the appointment as register
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 1011			Change Add
NAME	WARSHAW, STEVEN T.		1.2 NAME			
STREET ADDRESS	501 MERRIT 7		1.3 STREET	ADDRESS		
CITY-ST-ZIP	NORWALK CT	☐ DELEJE	1.4 CITY - S	1 - 7IP		Па Па
TITLE	VPD	(Detere	2.1 TITLE			☐ Change ☐ Ads
NAME STREET ADDRESS	GEBING, ROBERT K.		2.2 NAME	IDDDCC0		
CITY-ST-ZIP	NORWALK CT		2.3 STREET			
TITLE	7	DELETE	3.1 Trilf	51-ZIF		Change Add
NAME	PIERPONT, JANET M.	_ '	3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP	NORWALK CT		3.4. CHY-5	ST-ZIP		
TITLE	8	DELETE	4.1 TITLE			Change Add
NAME	FRAGER, JAMES S.		4. 2 NAME		TACKSON, JOHNIE	
STREET ADDRESS	501 MERRIT 7		4.3 \$TREE1		SO I MERRITT 7	
CITY-ST-ZIP	NORWALK CT		4.4 CHY - S	T- 7IP	NORWALK CT	
TITLE		☐ DELETE	5.1 TITLE			Change Add
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP		The exe	5.4 CITY - S	1-2IP		·····
TITLE		☐ DELFTE	6.1 THLE			L. Change L. Ado
NAME			6.2 NAME			
STREET ADDRESS			63 STREET	l		
CITY_ST_7IP			B / CDV. S	מול ד		

14. I do 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 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 12 or Block 13 if epanged, or on an attackment of the needed of the corporation of the corpo

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