2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# 831681

Entity Name: CABOT CORPORATION

Current Principal Place of Business:

TWO SEAPORT LANE
SUITE 1300
BOSTON, MA 02210

New Principal Place of Business:

Current Mailing Address:

TWO SEAPORT LANE
SUITE 1300
BOSTON, MA 02210

New Mailing Address:

FEI Number: 04-2271897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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: SUDAC, IRENE
Address: TWO SEAPORT LANE, STE. 1300
City-St-Zip: BOSTON, MA 022102019

Title: P ( ) Delete
Name: PREVOST, PATRICK M
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

Title: CFO ( ) Delete
Name: MASON, JONATHAN
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

Title: C ( ) Delete
Name: BURNES, KENNETH
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

Title: D ( ) Delete
Name: BURNES, KENNETT F.
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

Title: S ( ) Delete
Name: BELL, JANE
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CFO (X) Change ( ) Addition
Name: CORDIERO, EDWARD
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

Title: EVP (X) Change ( ) Addition
Name: BRADY, WILLIAM
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

Title: D (X) Change ( ) Addition
Name: PREVOST, PATRICK
Address: TWO SEAPORT LANE SUITE 1300
City-St-Zip: BOSTON, MA 022102019

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

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: PETER M. HUNT VP 04/07/2009

Electronic Signature of Signing Officer or Director — Date