2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #849236 Jun 19, 2000 8:00 am Secretary of State 1. Entity Name **ENGELHARD CORPORATION** 06-19-2000 90004 048 ***550.00 Mailing Address Principal Place of Business 101 WOOD AVE 101 WOOD AVE ISELIN NJ 08830 ISELIN NJ 08830-2703 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 22-1586002 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition TITLE CD ☐ Delete TITI F NAME SMITH, O.R. STREET ADDRESS STREET ADDRESS 101 WOOD AVE CITY-ST-ZIP CITY-ST-ZIP **ISELIN NJ** ☐ Change Addition ☐ Delete TITLE TITLE NAME antonini, Marion H NAME STREET ADDRESS STREET ADDRESS 101 WOOD AVENUE CITY-ST-ZIP CITY-ST-7IP **ISELIN NJ** . Delete . ____ Addition TITLE. TITLE DORNBUSCH II, A.A. NAME NAME STREET ADDRESS STREET ADDRESS 101 WOOD AVE CITY-ST-ZIP CITY-ST-ZIP **ISELIN NJ** Addition ☐ Change VCF0 TITLE Delete Delete TITLE FITZPATRICK, THOMAS P NAME NAME STREET ADDRESS STREET ADDRESS 101 WOOD AVE CITY-ST-ZIP CITY-ST-ZIP ISELIN NJ 08830 ☐ Change Addition TITLE ☐ Delete TITLE NAME RAPIN, PETER R NAME 101 WOOD AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ISELIN NJ 08830 Change Addition Delete TITLE TITLE NAME SLACK, H.R STREET ADDRESS STREET ADDRESS 101 WOOD AVE CITY-ST-ZIP CITY-ST-ZIP **ISELIN NJ** 13. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.