

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

FILED
May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 850209 (8)

1. Corporation Name
ALLIED CHEMICAL CORPORATION



Principal Place of Business 101 COLUMBIA RD P.O. BOX 1057 - TAX DEPT MORRISTOWN NJ 07962	Mailing Address 101 COLUMBIA RD P.O. BOX 1057 - TAX DEPT MORRISTOWN NJ 07962-1057
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

3. Date Incorporated or Qualified 09/01/1981	3a. Date of Last Report 05/10/1996
4. FEI Number 22-2338767	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 198.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
85 Zip Code

FL

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

TITLE	VSD	<input type="checkbox"/> DELETE
NAME	PATRICK, VICTOR P	SCHEDULE ATTACHED
STREET ADDRESS	101 COLUMBIA RD	
CITY-ST-ZIP	MORRISTOWN NJ	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SINAIKIN, RONALD A	
STREET ADDRESS	101 COLUMBIA RD	
CITY-ST-ZIP	MORRISTOWN NJ	
TITLE	V	<input type="checkbox"/> DELETE
NAME	BROWNSTEIN, PAUL H	
STREET ADDRESS	101 COLUMBIA RD	
CITY-ST-ZIP	MORRISTOWN NJ	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MARSHALL, DENNIS R.	
STREET ADDRESS	101 COLUMBIA ROAD	
CITY-ST-ZIP	MORRISTOWN NJ	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	MATTHEWS, ROGER C.	
STREET ADDRESS	101 COLUMBIA ROAD	
CITY-ST-ZIP	MORRISTOWN NJ	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	T Gamble Jr., John
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 changed, on an attachment with an address.

SIGNATURE: *Paul H. Brownstein* **P. H. Brownstein** 4/25/97 201-455-4037

CR2E034 (9/96)

04/17/97

Officers and Directors - Business Address

Allied Chemical Corporation

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Paul Brownstein	Assistant Vice President-Taxes	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962
John Gamble Jr.	Treasurer	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962
Dennis Marshall	Director President	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962
Victor Patrick	Director Vice President and Secretary	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962
Ronald Sinaikin	Vice President-Taxes	AlliedSignal Inc. 101 Columbia Road Morristown, NJ 07962