


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # B01000000169 1. Entity Name AIR PRODUCTS POLYMERS, L.P.	
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Principal Place of Business 7201 HAMILTON BLVD. ALLENTOWN, PA 18195	Mailing Address 7201 HAMILTON BLVD. ALLENTOWN, PA 18195
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DO NOT WRITE IN THIS SPACE



03212008 No Chg-LP

CR2E003 (11/05)

4. FEI Number: 23-2974634	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.

U00000503486
04/26/06-00034-014 500.00
DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	B01000000168 AIR PRODUCTS POLYMERS HOLDINGS, L.P. 7201 HAMILTON BLVD. ALLENTOWN, PA 18195
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a General Partner of the limited partnership, or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: D H Green **D H. Green** **Assistant Treasurer** 3/22/06 610-481-8581
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #