FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 22, 2003 8:00 am Secretary of State

UNIFORM BUSINESS REPORT (UBA)						occiding of other			
DOCUMENT # FO2 00000253/ 1. Entity Name Johnson Matthey Inc.						04-22-2003 90042 010 ***150.00			
2. Principal Place of 11300 New Be		3. Mailing Address 460 E. Swedesford Road							
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 2000				DO NOT WRITE IN THIS SPACE			
City & State Jacksonville, F	L .	City & State Wavne, PA	·		4. FE	FEI Number 23-0411710 Applied For Not Applicable			
Zip 32206	Country USA	Zip 19087	Count USA	ry	5. Ce	5. Certificate of Status Desired \$8.75 Additional Fee Required			
وأراحه فيستجيب وأراء هناء	And the second s		. وروستان ر <u>اهمتان</u>	Name of o	**	e and Address of Current F	Registered A	\gent	
DO NOT WOITE				C1 C0		Orporation (P.O. Box Number is Not Acceptable)			
7 · 3 · 3 · 3 · 3 · 3 · 3 · 3 · 3 · 3 ·					(P.O. Bo)				
IN THIS SPACE				1200 So. F	Pine Isla	ine Island Road			
C.		* .		City Plantat	tion		FL	Zip Code 33324	
the obligations of SIGNATURE	· .							niliar with, and accept	
	. typed or printed name of registered ager I - May 1 Fee is \$150.00	nt and title if applicable.	NOTE: Registered	Agent signature requir	red when reins	lating)	DATE		
After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State						Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10. 3 3 5 5 5	OFFICERS ANI							* * * * * * * * * * * * * * * * * * * *	
	CRN Clark 2-4 Cockspur St. London, England								
TITLE P NAME CRN	I Clark		TITLE NAME	l l		~	•	4	

2-4 Cockspur St, London, England CITY-ST-ZIP CITY-ST-ZIP NAME NAME **EH Ravert** STREET ADDRESS STREET ADDRESS DO NOT WRITE 460 E. Swedesford Rd, Wayne, PA 19087 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE VΡ IN THIS SPACE NAME NAME . RM Talley STREET ADDRESS STREET ADDRESS 460 E. Swedesford Rd, Wayne, PA 19087 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Т NAME NAME KJ Black STREET ADDRESS STREET ADDRESS 460 E. Swedesford Rd, Wayne, PA 19087 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE **VP** NAME. NAME AJ Trifiletti STREET ADDRESS STREET ADDRESS 460 E. Swedesford Rd, Wayne, PA 19087 CITY-ST-ZIP CITY-SY-ZIP

12. I 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 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 reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all offer the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EH Ravert, Vice President

4/15/03

610-971-3000

Date

Daytime Phone #