

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000001045 1. Entity Name FIRMENICH INCORPORATED	
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Principal Place of Business 250 PLAINSBORO RD PLAINSBORO, NJ 08536	Mailing Address PO BOX 5880 PRINCETON, NJ 08453
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DO NOT WRITE IN THIS SPACE



02232006 No Chg-P CR2E034 (11/05)

4. FEI Number 13-5560633	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C FIRMENICH, PATRICK 250 PLAINSBORO RD PLAINSBORO, NJ 08536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP WEINSTEIN, ROBERT 250 PLAINSBORO RD PLAINSBORO, NJ 08536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAY, PAUL LOUIS 250 PLAINSBORO RD PLAINSBORO, NJ 08536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BECHENIT, ERIC 250 PLAINSBORO RD PLAINSBORO, NJ 08536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JORGENSEN, ERIC 250 PLAINSBORO RD PLAINSBORO, NJ 08536
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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03/21/06-80064-022 150.00

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Eric Jorgensen* V.P. TREASURER 2/26/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #