2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# F05000006726

Entity Name: IMERYS KAOLIN, INC.

Current Principal Place of Business:

100 MANSELL COURT EAST, SUITE 300
ROSWELL, GA 30076

New Principal Place of Business:

Current Mailing Address:

100 MANSELL COURT EAST, SUITE 300
ROSWELL, GA 30076

New Mailing Address:

FEI Number: 58-1924211 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete
Name: CABY, DAMIEN
Address: 100 MANSELL CT E, SUITE 300
City-St-Zip: ROSWELL, GA 30076 US

Title: DT ( ) Delete
Name: HICKS, JEFFREY C
Address: 100 MANSELL COURT EAST, SUITE 300
City-St-Zip: ROSWELL, GA 30076

Title: DS ( ) Delete
Name: RADCLIFFE, SUSAN B
Address: 100 MANSELL COURT EAST, SUITE 300
City-St-Zip: ROSWELL, GA 30076

Title: D ( ) Delete
Name: BROOKS, EVA P
Address: 100 MANSELL CT. E., STE. 300
City-St-Zip: ROSWELL, GA 30076

Title: D ( ) Delete
Name: CORREA, ERROL
Address: 100 MANSELL CT. E, SUITE 300
City-St-Zip: ROSWELL, GA 30076

Title: DVP ( ) Delete
Name: SHEEHEY, CHRISTOPHER
Address: 100 MANSELL CT. E., STE. 300
City-St-Zip: ROSWELL, GA 30076 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH K. PARSONS CP 01/14/2009

Electronic Signature of Signing Officer or Director — Date