

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006820

Entity Name: ELEMENTIS SPECIALTIES, INC.

FILED
Mar 12, 2009
Secretary of State

Current Principal Place of Business:

329 WYCKOFFS MILL RD.
HIGHTSTOWN, NJ 08520

New Principal Place of Business:

Current Mailing Address:

329 WYCKOFFS MILL RD.
HIGHTSTOWN, NJ 08520

New Mailing Address:

FEI Number: 05-0495836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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: D () Delete
Name: DUTRO, DAVID
Address: 329 WYCKOFFS MILL RD
City-St-Zip: HIGHTSTOWN, NJ 08520

Title: P/D () Delete
Name: MCCLATCHY, GREGORY C
Address: 329 WYCKOFFS MILL RD
City-St-Zip: HIGHTSTOWN, NJ 08520

Title: D/S () Delete
Name: ALLEN, WALKER
Address: 329 WYCKOFFS MILL RD.
City-St-Zip: HIGHTSTOWN, NJ 08520

Title: V/T () Delete
Name: BRASCO, SCOTT
Address: 329 WYCKOFFS MILL RD.
City-St-Zip: HIGHTSTOWN, NJ 08520

Title: V () Delete
Name: CAPPUCCI, GREGORY
Address: 329 WYCKOFFS MILL RD.
City-St-Zip: HIGHTSTOWN, NJ 08520

Title: T () Delete
Name: LAURA, GARABEDIAN
Address: 4 ROLLING MEADOW DRIVE
City-St-Zip: MILLIS, MA 02054

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: AT (X) Change () Addition
Name: LAURA, GARABEDIAN
Address: 4 ROLLING MEADOW DRIVE
City-St-Zip: MILLIS, MA 02054

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: LAURA GARABEDIAN

AT

03/12/2009

Electronic Signature of Signing Officer or Director

Date