

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F30946

Entity Name: MARMAN (NUFARM) INC.

FILED
Feb 22, 2007
Secretary of State

Current Principal Place of Business:

1333 BURR RIDGE PKWY
SUITE 125A
BURR RIDGE, IL 60527 US

Current Mailing Address:

1333 BURR RIDGE PKWY
SUITE 125A
BURR RIDGE, IL 60527 US

FEI Number: 59-2110843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

155 HARVESTER DR
SUITE 200
BURR RIDGE, IL 60527 US

New Mailing Address:

155 HARVESTER DR.
SUITE 200
BURR RIDGE, IL 60527 US

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: MR () Delete
Name: CRAWFORD, GREG PRES
Address: 1333 BURR RIDGE PKWY
City-St-Zip: BURR RIDGE, IL 60527 IL

Title: MR () Delete
Name: BARBER, GARY CFO
Address: 1333 BURR RIDGE PKWY
City-St-Zip: BURR RIDGE, IL 60527 US

Title: MR (X) Delete
Name: KAILUS, BILL A SECR
Address: 1333 BURR RIDGE PKWY
City-St-Zip: BURR RIDGE, IL 60527 US

Title: MR (X) Delete
Name: QUICK, GEOFF VP
Address: 1333 BURR RIDGE PKWY
City-St-Zip: BURR RIDGE, IL 60527 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRAWFORD, GREG PRES
Address: 155 HARVESTER DR
City-St-Zip: BURR RIDGE, IL 60527 US

Title: D (X) Change () Addition
Name: BARBER, GARY CFO
Address: 155 HARVESTER DR
City-St-Zip: BURR RIDGE, IL 60527 US

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 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: GREG CRAWFORD

P

02/22/2007

Electronic Signature of Signing Officer or Director

Date