

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 20, 2007 8:00 am**  
**Secretary of State**

04-20-2007 90202 045 \*\*\*150.00

**DOCUMENT # F93000005842**

1. Entity Name  
**CYTEC INDUSTRIES INC.**



Principal Place of Business  
**5 GARRET MOUNTAIN PLAZA  
WEST PATERSON, NJ 07424**

Mailing Address  
**5 GARRET MOUNTAIN PLAZA  
WEST PATERSON, NJ 07424**

**DO NOT WRITE IN THIS SPACE**



01232007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**22-3268660**

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 S. PINE ISLAND RD.  
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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	LILLEY, DAVID
STREET ADDRESS	FIVE GARRET MOUNTAIN PLAZA
CITY-ST-ZIP	W. PATERSON, NJ
TITLE	D
NAME	Chris A. Davis
STREET ADDRESS	5 Garret Mountain Plaza
CITY-ST-ZIP	West Paterson, NJ 07424
TITLE	D
NAME	POWELL, WILLIAM P
STREET ADDRESS	535 MADISON AVE.
CITY-ST-ZIP	NEW YORK, NY 10022
TITLE	VP
NAME	CRONIN, JAMES P
STREET ADDRESS	FIVE GARRET MOUNTAIN PLAZA
CITY-ST-ZIP	WEST PATERSON, NJ
TITLE	VP
NAME	SMITH, ROY
STREET ADDRESS	5 GARRET MOUNTAIN PLAZA
CITY-ST-ZIP	WEST PATERSON, NJ 07424
TITLE	AS
NAME	FERGUSON, RICHARD T
STREET ADDRESS	FIVE GARRET MOUNTAIN PLAZA
CITY-ST-ZIP	WEST PATERSON, NJ 07424

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IN THIS SPACE**

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: \_\_\_\_\_

**Richard T. Ferguson**

**4/9/07**

**973-357-3100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #