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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name F94000000554 (5)

HARRIS SPECIALTY CHEMICALS, INC.

Principal Place of Business Mailing Address 10245 CENTURIÓN PARKWAY NORTH 10245 CENTURION PARKWAY NORTH JACKSONVILLE FL 32256 JACKSONVILLE FL 32256

FILED Apr 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/04/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 13-3740791 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 29 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 City Zip Code 85 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. CCEO DELETE Change TITLE 1.1 TITLE Chairmar HARRIS, D. GEORGE NAME 1.2 NAME 399 PARK AVE STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 1.4 CITY - ST - ZIP President, CED David Fyfe VASA DELETE. Change Addition TITLE 2.1 TITLE DONAHUE, RICHARD J NAME 2.2 NAME 10245 Centurion Pluvil. 399 PARK AVE. STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK NY** Jacksonville, CITY-ST-ZIP 2. 4 CITY-ST-ZIP DVPS K) DELETE TITLE 3.1 TITLE ___ Change -Addition Michael D. Rowla KILPATRICK, DONALD G NAME 3.2 NAME 10245 conturion Auy N. 399 PARK AVE. STREET ADDRESS 3.3 STREET ADDRESS **NEW YORK NY** Jacksonville CITY-ST-ZIP 3.4. CITY - ST- ZIP VPTA DELETE ★ Addition 4.1 TITLE Secretary NICK, RICHARD J Thomas it. Clayto NAME 4.2 NAME 399 PARK AVE. STREET ADDRESS 4.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 4.4 CITY-ST-ZIP P DELETE TITLE 5.1 TITLE Addition PETROCELLI, ANTHONY J NAME 5.2 NAME 399 PARK AVE. STREET ADDRESS 5.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change ☐ Addition LESTER, ROBERT M 6.2 NAME 10245 CENTURION PARKWAY, NORTH STREET ADDRESS 6.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an educress.

CICNATUDE.

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