

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F95000003104 (5)**

1. Corporation Name
HUNTSMAN POLYPROPYLENE CORPORATION



Principal Place of Business
**2000 EAGLE GATE TOWER
SALT LAKE CITY UT 84111**

Mailing Address
**2000 EAGLE GATE TOWER
SALT LAKE CITY UT 84111**

3. Date Incorporated or Qualified
06/27/1995

3a. Date of Last Report

4. FEI Number
87-0496688

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 **500 Huntsman Way**

22 Suite, Apt. #, etc.

23 **Salt Lake City, Utah**

24 **84108** 25 **USA**

26 **500 Huntsman Way**

27 Suite, Apt. #, etc.

28 **Salt Lake City, Utah**

29 **84108** 30 **USA**

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	CCEO	<input type="checkbox"/> DELETE
NAME	HUNTSMAN, JON M	
STREET ADDRESS	2000 EAGLE GATE TOWER	
CITY-ST-ZIP	SALT LAKE CITY UT 84111	
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	RASBAND, RONALD A	
STREET ADDRESS	2000 EAGLE GATE TOWER	
CITY-ST-ZIP	SALT LAKE CITY UT 84111	
TITLE	DVS	<input type="checkbox"/> DELETE
NAME	LENCE, ROBERT B	
STREET ADDRESS	2000 EAGLE GATE TOWER	
CITY-ST-ZIP	SALT LAKE CITY UT 84111	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	DURHAM, RICHARD P	
STREET ADDRESS	2000 EAGLE GATE TOWER	
CITY-ST-ZIP	SALT LAKE CITY UT 84111	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	HUNTSMAN, PETER R	
STREET ADDRESS	2000 EAGLE GATE TOWER	
CITY-ST-ZIP	SALT LAKE CITY UT 84111	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	PLANT, RANDALL A	
STREET ADDRESS	2000 EAGLE GATE TOWER	
CITY-ST-ZIP	SALT LAKE CITY UT 84111	

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D/C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Huntsman, Jon M.	
13 STREET ADDRESS	500 Huntsman Way	
14 CITY-ST-ZIP	Salt Lake City, Utah 84108	
21 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Wood, Thomas H.	
23 STREET ADDRESS	5100 Bainbridge Blvd.	
24 CITY-ST-ZIP	Chesapeake, VA 23320	
31 TITLE	V/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Lence, Robert B.	
33 STREET ADDRESS	500 Huntsman Way	
34 CITY-ST-ZIP	Salt Lake City, Utah 84108	
41 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	Durham, Richard P.	
43 STREET ADDRESS	500 Huntsman Way	
44 CITY-ST-ZIP	Salt Lake City, Utah 84108	
51 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	Huntsman, Peter R.	
53 STREET ADDRESS	500 Huntsman Way	
54 CITY-ST-ZIP	Salt Lake City, Utah 84108	
61 TITLE	V/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	Plant, Randall A.	
63 STREET ADDRESS	500 Huntsman Way	
64 CITY-ST-ZIP	Salt Lake City, Utah 84108	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 (801)532-5200

CR2E034 (12/95)