

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 12, 1999 8:00 am  
Secretary of State

04-12-1999 90013 050 \*\*\*150.00

DOCUMENT # F96000001452

1. Corporation Name

MYCOGEN CROP PROTECTION, INC.

Principal Place of Business

5501 OBERLIN DRIVE  
SAN DIEGO CA 92121

Mailing Address

5501 OBERLIN DRIVE  
SAN DIEGO CA 92121

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/21/1996

4. FEI Number

33-0668708

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

25

2a. Mailing Address

26 9330 Zionsville Road

27 Suite, Apt. #, etc.

28 City & State

Indianapolis, IN

29 Zip Country

46268

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

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCD  
NAME BARNES, ANDREW C  
STREET ADDRESS 5501 OBERLIN DRIVE  
CITY-ST-ZIP SAN DIEGO CA

☒ DELETE

TITLE VSD  
NAME EIBL, CARLTON J  
STREET ADDRESS 5501 OBERLIN DRIVE  
CITY-ST-ZIP SAN DIEGO CA

☒ DELETE

TITLE TSD  
NAME BAUMKER, JAMES A  
STREET ADDRESS 5501 OBERLIN DRIVE  
CITY-ST-ZIP SAN DIEGO CA

☒ DELETE

TITLE AS  
NAME COLLINS, LOREEN P  
STREET ADDRESS 5501 OBERLIN DRIVE  
CITY-ST-ZIP SAN DIEGO CA

☒ DELETE

TITLE V  
NAME LITTLE, LARRY  
STREET ADDRESS 5501 OBERLIN DRIVE  
CITY-ST-ZIP SAN DIEGO CA

☒ DELETE

TITLE V  
NAME ZORNER, PAUL  
STREET ADDRESS 5501 OBERLIN DRIVE  
CITY-ST-ZIP SAN DIEGO CA

☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Nickolas D. Hein

1.3 STREET ADDRESS 9330 Zionsville Road

1.4 CITY-ST-ZIP Indianapolis, IN 46268

2.1 TITLE VSD ☒ Change ☐ Addition

2.2 NAME William W. Wales

2.3 STREET ADDRESS 9330 Zionsville Road

2.4 CITY-ST-ZIP Indianapolis, IN 46268

3.1 TITLE VTD ☒ Change ☐ Addition

3.2 NAME Gary L. Whitlock

3.3 STREET ADDRESS 9330 Zionsville Road

3.4 CITY-ST-ZIP Indianapolis, IN 46268

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

William W. Wales

3/16/99

317-337-7300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)