

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004109

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: ORICA USA INC.

**Current Principal Place of Business:**

33101 E QUINCY AVE  
WATKINS, CO 80137

**New Principal Place of Business:**

**Current Mailing Address:**

33101 E QUINCY AVE  
WATKINS, CO 80137

**New Mailing Address:**

FEI Number: 75-2661387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C S C  
4126 ST. AUGUSTINE ROAD  
TALLAHASSEE, FL 32301 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: PD ( ) Delete  
Name: ELKINGTON, CRAIG B  
Address: 33101 E QUINCY AVE  
City-St-Zip: WATKINS, CO 80137

Title: S ( ) Delete  
Name: CURTIS, CHRISTOPHER  
Address: 33101 E QUINCY AVE  
City-St-Zip: WATKINS, CO 80137

Title: VPD ( ) Delete  
Name: MARCHAND, RODNEY R  
Address: 33101 EAST QUINCY AVE  
City-St-Zip: WATKINS, CO 80137

Title: TD ( ) Delete  
Name: RICHARD, BETTS  
Address: 33101 EAST QUINCY AVE  
City-St-Zip: WATKINS, CO 80137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: LEONARD TEAGUE SENIOR TAX ANALYST

MR

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date