


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90164 031 ***150.00

DOCUMENT # F97000000072

1. Entity Name
 SYNGENTA CROP PROTECTION, INC.



Principal Place of Business: 410 SWING RD, GREENSBORO, NC 27409 US

Mailing Address: P.O. BOX 18300, GREENSBORO, NC 27419-8300 US

2. Principal Place of Business: Suite, Apt. #, etc.

3. Mailing Address: Suite, Apt. #, etc.

City & State: City & State

Zip: Zip Country: Country



6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 C/O CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION, FL 33324-2525

4. FEI Number: 56-2001572 Applied For: Not Applicable

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

7. Name and Address of New Registered Agent

Name: _____

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

City: _____ FL Zip Code: _____

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | | |
|----------------|---------------------------|--|
| TITLE | S | <input type="checkbox"/> Delete |
| NAME | ALVENTOSA, VINCENT | |
| STREET ADDRESS | 3718 CARDINAL DOWNS DRIVE | |
| CITY-ST-ZIP | GREENSBORO, NC 27410 | |
| TITLE | C | <input checked="" type="checkbox"/> Delete |
| NAME | MACK, MICHAEL | |
| STREET ADDRESS | 1903 LAFAYETTE AVE. | |
| CITY-ST-ZIP | GREENSBORO, NC 27407 | |
| TITLE | HL | <input type="checkbox"/> Delete |
| NAME | ALVENTOSA, VINCENT | |
| STREET ADDRESS | 3718 CARDINAL DOWNS DR. | |
| CITY-ST-ZIP | GREENSBORO, NC 27410 | |
| TITLE | AS | <input type="checkbox"/> Delete |
| NAME | QUAIN, CHERYL | |
| STREET ADDRESS | 145 FIRETHORNE DR | |
| CITY-ST-ZIP | WEST CHESTER, PA 19382 | |
| TITLE | HF | <input type="checkbox"/> Delete |
| NAME | WINCH, BRAYDON | |
| STREET ADDRESS | 3000 KLOSTER CT. | |
| CITY-ST-ZIP | GREENSBORO, NC 27455 | |
| TITLE | COO | <input type="checkbox"/> Delete |
| NAME | CHRISTOPHER AKINS, JOHN | |
| STREET ADDRESS | 22, RUE DE LANDSER | |
| CITY-ST-ZIP | DIETWILLER, F-6840 | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|----------------------|--|
| TITLE | PRESIDENT | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | VALDEMAR FISCHER | |
| STREET ADDRESS | 3201 ALLERTON CIRCLE | |
| CITY-ST-ZIP | GREENSBORO NC 27409 | |
| TITLE | ASSISTANT SECRETARY | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | MILLIE WRIGHT | |
| STREET ADDRESS | 5520 WESTBORNE DRIVE | |
| CITY-ST-ZIP | GREENSBORO NC 27407 | |
| TITLE | Please see ATTACHED | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | List, Thank you. | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. 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 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: MILLIE L. WRIGHT DATE: 4/19/05 DAYTIME PHONE: (336) 632-2664

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT 20048120

Document # F97000000072.

**SYNGENTA CROP PROTECTION, INC.
OFFICERS AND DIRECTORS**

56-2001572.

| Name & Title | Business Address | Home address |
|--|--|---|
| Aldemar Fischer Chairman & President | 410 Swing Road Greensboro, NC 27409 | 3201 Allerton Circle Greensboro NC 27409 |
| John Atkin Director | Schwarzwaldallee 215 Basel, Switzerland | 22 Rue De Landser F-68440 Dietwiller, France |
| Christoph Maeder Director | Schwarzwaldallee 215 Basel, Switzerland | Not available |
| Vincent Alventosa Director & Vice-President, General Counsel & Secretary | 410 Swing Road Greensboro, NC 27409 | 3718 Cardinal Downs Drive Greensboro, NC 27410 |
| Braydon Winch Director & Vice-President & Treasurer | 410 Swing Road Greensboro, NC 27409 | 3000 Kloster Court Greenboro, NC 27455 |
| Joe Powell Assistant Treasurer | 2200 Concord Pike P.O. Box 8353 Wilmington, DE 19803 | 15 Jonathan Morris Circle Media, PA 19063 |
| Bernadette Pinamont Assistant Treasurer | 2200 Concord Pike PO Box 8353 Wilmington, DE 19803 | 6 MISTY MEADOW DR WEST CHESTER, PA 19382 |
| Cheryl Quain Assistant Secretary | 2200 Concord Pike PO Box 8353 Wilmington, DE 19803 | 145 FIRETHORNE DRIVE WEST CHESTER, PA 19382 |
| Elizabeth K. Quarles Assistant Secretary | 2200 Concord Pike PO Box 8353 Wilmington, DE 19803 | 105 PENNINGTON RD PAOLI, PA 19301 |
| Millie Wright Assistant Secretary | 410 Swing Road Greensboro, NC 27409 | 5520 Westerborne Drive Greensboro, NC 27407 |
| Brian Reeve Assistant Secretary | 410 Swing Road Greensboro, NC 27409 | 815 PEBBLE DRIVE GREENSBORO, NC 27410 |