

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004358

FILED
Mar 23, 2011
Secretary of State

Entity Name: SOLUTIA INC.

Current Principal Place of Business:

575 MARYVILLE CENTRE DR
ST. LOUIS, MO 63141

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 66760
ST. LOUIS, MO 63166760

New Mailing Address:

FEI Number: 43-1781797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CFO
Name: SULLIVAN, JAMES M
Address: 575 MARYVILLE CENTRE DR
City-St-Zip: ST. LOUIS, MO 63141

Title: SCTY
Name: SINGER, MIRIAM R
Address: 575 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141

Title: CEOD
Name: QUINN, JEFFRY N
Address: 575 MARYVILLE CENTER DR
City-St-Zip: ST. LOUIS, MO 63141

Title: DIR
Name: DEVEER, ROBERT K
Address: 575 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141

Title: AT
Name: TICHENOR, JAMES A
Address: 575 MARYVILLE CENTRE DR
City-St-Zip: ST. LOUIS, MO 63141

Title: AT
Name: HASELHORST, MARVIN R
Address: 575 MARYVILLE CENTRE DR.
City-St-Zip: ST. LOUIS, MO 63141 US

I hereby 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 all other like empowered.

SIGNATURE: MARVIN R. HASELHORST

AT

03/23/2011

Electronic Signature of Signing Officer or Director

Date