2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2005
Secretary of State

DOCUMENT# M02000001243

Entity Name: MARTIN MARIETTA MAGNESIA SPECIALTIES, LLC

Current Principal Place of Business:

2710 WYCLIFF ROAD
RALEIGH, NC 27607

New Principal Place of Business:

Current Mailing Address:

2710 WYCLIFF ROAD
RALEIGH, NC 27607

New Mailing Address:

FEI Number: 52-1603828 **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

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	SHEPHARD, DANIEL G	
Address:	2710 WYCLIFF ROAD	
City-St-Zip:	RALEIGH, NC 27607	
Title:	MGR	( ) Delete
Name:	BAR, ROSELYN R	
Address:	2710 WYCLIFF ROAD	
City-St-Zip:	RALEIGH, NC 27607	
Title:	MGR	( ) Delete
Name:	HENRY, JANICE K	
Address:	2710 WYCLIFF ROAD	
City-St-Zip:	RALEIGH, NC 27607	
Title:	MGR	( ) Delete
Name:	BROOKS, M.GUY III	
Address:	2710 WYCLIFF ROAD	
City-St-Zip:	RALEIGH, NC 27607	
Title:	MGR	( ) Delete
Name:	CONNICK, ANN M	
Address:	2710 WYCLIFF ROAD	
City-St-Zip:	RALEIGH, NC 27607	
Title:	MGR	( ) Delete
Name:	SIPLING, PHILIP J	
Address:	2710 WYCLIFF ROAD	
City-St-Zip:	RALEIGH, NC 27607	

ADDITIONS/CHANGES:

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:	
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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANN M CONNICK MGR 04/08/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date