

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001243

FILED
Mar 31, 2008
Secretary of State

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/MANAGERS:

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: LLOYD, ANNE H
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: MGR (X) Change () Addition
Name: NYE, CHARLES H
Address: 2710 WYCLIFF ROAD
City-St-Zip: RALEIGH, NC 27607

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 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

03/31/2008

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