2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# M06000003730

Entity Name: PHIBRO LLC

Current Principal Place of Business:

500 NYALA FARM ROAD
WESTPORT, CT 06880

New Principal Place of Business:

500 NYALA FARMS ROAD
WESTPORT, CT 06880

Current Mailing Address:

500 NYALA FARM ROAD
WESTPORT, CT 06880

New Mailing Address:

P.O. BOX 30509
TAX & REPORTING
TAMPA, FL 33610

FEI Number: 35-2272401 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: HALL, ANDREW J
Address: 500 NYALA FARM ROAD
City-St-Zip: WESTPORT, CT 06880

Title: MGR ( ) Delete
Name: MCAVITY, THOMAS M
Address: 500 NYALA FARM ROAD
City-St-Zip: WESTPORT, CT 06880

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition
Name: HALL, ANDREW J
Address: 500 NYALA FARMS ROAD
City-St-Zip: WESTPORT, CT 06880

Title: VP (X) Change ( ) Addition
Name: BLUMENTHAL, DAVID
Address: 500 NYALA FARMS ROAD
City-St-Zip: WESTPORT, CT 06880

Title: AVP ( ) Change (X) Addition
Name: HOFFMAN, LISA
Address: 3800 CITIGROUP CENTER DRIVE
City-St-Zip: TAMPA, FL 33610

Title: T ( ) Change (X) Addition
Name: GRIFFIN, MICHAEL
Address: 500 NYALA FARMS ROAD
City-St-Zip: WESPORT, CT 06880

Title: S ( ) Change (X) Addition
Name: YOUNG, MICHAEL
Address: 500 NYALA FARMS ROAD
City-St-Zip: WESTPORT, CT 06880

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: LISA HOFFMAN AVP 04/08/2009

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