2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# P18029

Entity Name: METSO MINERALS INDUSTRIES, INC.

Current Principal Place of Business:

20965 CROSSROADS CIRCLE
WAUKESHA, WI 53186 US

New Principal Place of Business:

Current Mailing Address:

20965 CROSSROADS CIRCLE
WAUKESHA, WI 53186 US

New Mailing Address:

FEI Number: 39-1599801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MELARTI, HANNA
Address: 4778 OLD LYNNE COURT
City-St-Zip: DULUTH, GA 30096

Title: V ( ) Delete
Name: PHILLIPS, MIKE
Address: 2371 BELLEFONTE AVE
City-St-Zip: LAWRENCEVILLE, GA 30043

Title: V ( ) Delete
Name: QUINN, PATRICK
Address: 2712 CHATSWORTH CIRCLE
City-St-Zip: WAUKESHA, WI 53188

Title: AS (X) Delete
Name: HERALY, STEVE
Address: 4858 HUBERTUS ROAD
City-St-Zip: HUBERTUS, WI 53033

Title: V (X) Delete
Name: BENKO, ANDREW,
Address: 3888 RIDGEWOOD ROAD
City-St-Zip: YORK, PA 17402

Title: S (X) Delete
Name: DILLMANN, TODD A
Address: 894 COUNTRY CLUB LANE
City-St-Zip: FOND DU LAC, WI 54935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: PHILLIPS, MIKE
Address: 2900 COURTYARDS DRIVE
City-St-Zip: NORCROSS, GA 30071

Title: S (X) Change ( ) Addition
Name: DILLMANN, TODD
Address: 20965 CROSSROADS CIRCLE
City-St-Zip: WAUKESHA, WI 53186

Title: AS (X) Change ( ) Addition
Name: HERALY, STEVE
Address: 20965 CROSSROADS CIRCLE
City-St-Zip: WAUKESHA, WI 53186

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 Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVE HERALY AS 04/27/2006

Electronic Signature of Signing Officer or Director Date