2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 24, 2009
Secretary of State

DOCUMENT# P29990

Entity Name: LOUIS DREYFUS CORPORATION

Current Principal Place of Business:

40 DANBURY ROAD
WILTON, CT 068970810

New Principal Place of Business:

Current Mailing Address:

40 DANBURY ROAD
C/O CORP TAX DEPT
WILTON, CT 068970810

New Mailing Address:

FEI Number: 13-5204055 **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 32301 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: SVP ( ) Delete
Name: WOLKIN, HAL
Address: 40 DANBURY ROAD, PO BOX 810
City-St-Zip: WILTON, CT 068970810

Title: DEVP (X) Delete
Name: NICOSIA, JOSEPH
Address: 7215 GOODLET FARMS
City-St-Zip: CORDOVA, TN 38018

Title: PD (X) Delete
Name: ANDERSON, ERIK
Address: 40 DANBURY RD
City-St-Zip: WILTON, CT 06897

Title: T (X) Delete
Name: STEPANOV, SERGE A
Address: 40 DANBURY RD
City-St-Zip: WILTON, CT 06897

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: MARTIN, SEAN W
Address: 40 DANBURY ROAD, PO BOX 810
City-St-Zip: WILTON, CT 068970810

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 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: SEAN W. MARTIN VP 06/24/2009

Electronic Signature of Signing Officer or Director — Date