

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2000 8:00 am
Secretary of State
 03-02-2000 90108 020 ***150.00

DOCUMENT # **P36763**

Entity Name
NOVA CHEMICALS INC.

Principal Place of Business FRANKFORT ROAD PA 15061	Mailing Address 400 FRANKFORT ROAD MONACA PA 15061-2212 US
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DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 36-3203832	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P	<input checked="" type="checkbox"/> Delete	NAME LUCAS, WES W	STREET ADDRESS 400 FRANKFORT RD MANACA GA 15061
TITLE DS	<input checked="" type="checkbox"/> Delete	NAME WENSKY, ARNOLD H	STREET ADDRESS 2000 CLIFF MINE ROAD PITTSBURGH PA 15275
TITLE D	<input type="checkbox"/> Delete	NAME BOIVIN, DANIEL W	STREET ADDRESS 645- 7TH AVENUE S.W. CALGARY AL
TITLE DT	<input type="checkbox"/> Delete	NAME UMLAH, JOHN R	STREET ADDRESS 40 FRANKFORT ROAD MONACA PA 15061
TITLE AS	<input type="checkbox"/> Delete	NAME DEAN, ERNERST V	STREET ADDRESS 400 FRANKFORT ROAD MONACA PA 15061
TITLE DV	<input type="checkbox"/> Delete	NAME GREENE, WILLIAM G	STREET ADDRESS 400 FRANKFORT ROAD MONACA PA 15061

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME Woodstra, Bentley	STREET ADDRESS 1550 Coraopolis Heights Rd. Moon Township, PA 15108
TITLE DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Umlah, John R.	STREET ADDRESS 1550 Coraopolis Heights Rd. Moon Township, PA 15108
TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Dean, Ernest V.	STREET ADDRESS 1550 Coraopolis Heights Road Moon Township, PA 15108
TITLE DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME Greene, William G.	STREET ADDRESS 1550 Coraopolis Heights Road Moon Township, PA 15108

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **2/14/00** Daytime Phone # _____

CR2E034 (9/99)