

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13 1997 8:00am
Secretary of State

DOCUMENT # P38935 (3)

1. Corporation Name
VULCAN CHEMICAL TECHNOLOGIES, INC.

Principal Place of Business

ONE METROPLEX DR.
CORPORATE TAX DEPT.
BIRMINGHAM AL 35253-0187

Mailing Address

ONE METROPLEX DR.
CORPORATE TAX DEPT.
BIRMINGHAM AL 35209-6805



2. Principal Place of Business

21 Suite, Apt. #, etc.
22 P.O. BOX 530187
23 City & State

24 Zip
25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.
27 City & State

28 Zip
29 Country

3. Date Incorporated or Qualified

05/22/1992

3a. Date of Last Report

05/01/1996

4. FEI Number

~~==84-2290885~~ 76-0300400

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
110 NORTH MAGNOLIA STREET

83

84 City

FL 85 Zip Code
32301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE C ☒ DELETE

NAME FERRIS, M.J.
STREET ADDRESS ONE METROPLEX DR.
CITY-ST-ZIP BIRMINGHAM AL 35253-0187

TITLE T ☐ DELETE

NAME REESE, T.W.
STREET ADDRESS ONE METROPLEX DR.
CITY-ST-ZIP BIRMINGHAM AL 35253-0187

TITLE P ☐ DELETE

NAME BROWNFIELD, D.L.
STREET ADDRESS ONE METROPLEX DR.
CITY-ST-ZIP BIRMINGHAM AL 35253-0187

TITLE VD ☐ DELETE

NAME WASON, R.A. IV
STREET ADDRESS ONE METROPLEX DR.
CITY-ST-ZIP BIRMINGHAM AL 35253-0187

TITLE TD ☐ DELETE

NAME SANSONE, D.F.
STREET ADDRESS ONE METROPLEX DR.
CITY-ST-ZIP BIRMINGHAM AL 35253-0187

TITLE SD ☐ DELETE

NAME SYDNOR, E.S.
STREET ADDRESS ONE METROPLEX DR.
CITY-ST-ZIP BIRMINGHAM AL 35253-0187

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

CR2E034 (9/96)