

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002821

Entity Name: ALBEMARLE CORPORATION**Current Principal Place of Business:**4250 CONGRESS STREET
SUITE 900
CHARLOTTE, NC 28209**Current Mailing Address:**4250 CONGRESS STREET
SUITE 900
CHARLOTTE, NC 28209 US**FEI Number:** 54-1692118**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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

Officer/Director Detail :

Title CEO, DIRECTOR
Name KISSAM, LUTHER C IV
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title CFO
Name TOZIER, SCOTT A
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name O'BRIEN, JAMES J.
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name WOLFF, ALEJANDRO
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title SECRETARY
Name NARWOLD, KAREN G
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name TAGGART, HARRIETT TEE
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name STEINER, GERALD A.
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name MAINE, DOUGLAS L
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

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I hereby 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 all other like empowered.

SIGNATURE: KAREN G. NARWOLD

SECRETARY

03/05/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HERNANDEZ, WILLIAM H
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name SEAVERS, DEAN L
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name BRIAS, MARY LAUREN
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name VAN DEURSEN, HOLLY A.
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title TREASURER
Name DUNBAR, AMY M
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name O'CONNELL, DIARMUID B
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name MINOR, GLENDA J.
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209

Title DIRECTOR
Name MASTERS, J. KENT
Address 4250 CONGRESS STREET
SUITE 900
City-State-Zip: CHARLOTTE NC 28209