



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 100995		2. Name of Corporation Sylvan Chemical Co., Inc.			
3. Street Address Principal Business Office PO Box 1926, M-416, M-416			City Spartanburg	State SC	Zip 29304
4. Business Phone No. (864) 503-2403		5. State of Incorporation DELAWARE			6. SIC Code 7880
7. Brief Description of the Character of Business Conducted in Rhode Island CARPET INSTALLATION.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Dr. G. A. Allen			Vice President Name Michael J. McDonald		
Street Address 920 Milliken Road			Street Address 201 Lukken Dr.		
City Spartanburg	State SC	Zip 29303	City LaGrange	State GA	Zip 30240
Secretary Name James F. Zahrn			Treasurer Name James F. Zahrn		
Street Address 920 Milliken Road			Street Address 920 Milliken Road		
City Spartanburg	State SC	Zip 29303	City Spartanburg	State SC	Zip 29303
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Dr. G. A. Allen			Director Name Roger Milliken		
Street Address 920 Milliken Road			Street Address 234 S. Fairview Avenue		
City Spartanburg	State SC	Zip 29303	City Spartanburg	State SC	Zip 29302
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
50	COMM	\$100.00	50	Common	\$100.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



100995

File Date 1-25-05
Check No. 5612
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 1/19/05
Signature of Officer Date
James F. Zahrn
Print or Type Name of Officer
Secretary
Title of Officer



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4. Business Phone No. (864) 503-2403		5. State of Incorporation DELAWARE			6. SIC Code 7880
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8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Dr. G. A. Allen			Vice President Name Michael J. McDonald		
Street Address 920 Milliken Road			Street Address 201 Lukken Dr.		
City Spartanburg	State SC	Zip 29303	City LaGrange	State GA	Zip 30240
Secretary Name James F. Zahn			Treasurer Name James F. Zahn		
Street Address 920 Milliken Road			Street Address 920 Milliken Road		
City Spartanburg,	State SC	Zip 29303	City Spartanburg	State SC	Zip 29303
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Dr. G. A. Allen			Director Name Roger Milliken		
Street Address 920 Milliken Road			Street Address 234 S. Fairview Avenue		
City Spartanburg	State SC	Zip 29303	City Spartanburg	State SC	Zip 29302
Director Name Dr. T. J. Malone			Director Name		
Street Address 920 Milliken Road			Street Address		
City Spartanburg	State SC	Zip 29303	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
50 COMM \$100.00 PAR VALUE			50	Common	\$100.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 0 9 9 5 *

File Date 2/26/04
Check No. 005127
By: [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

James F. Zahn 2/23/04
Signature of Officer Date
James F. Zahn
Print or Type Name of Officer
Secretary
Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. **100995**
2. Name of Corporation **Sylvan Chemical Co., Inc.**
3. Street Address Principal Business Office
P.O. Box 1926, M-416
4. Business Phone No. **(864) 503-2403**
5. State of Incorporation **DELAWARE**
7. Brief Description of the Character of Business Conducted in Rhode Island
Carpet Installation

City **Spartanburg** State **SC** Zip **29304**
6. SIC Code **7880**

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **E. Wayne Hunter**
Street Address
201 Lukken Dr.
City **LaGrange** State **GA** Zip **30240**

Vice President Name **Ashley Allen**
Street Address
920 Milliken Road
City **Spartanburg** State **SC** Zip **29303**

Secretary Name **James F. Zahrn**
Street Address
920 Milliken Road
City **Spartanburg** State **SC** Zip **29303**

Treasurer Name **James F. Zahrn**
Street Address
920 Milliken Road
City **Spartanburg** State **SC** Zip **29303**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **E. Wayne Hunter**
Street Address
201 Lukken Drive
City **LaGrange** State **GA** Zip **30240**

Director Name **Roger Milliken**
Street Address
234 S. Fairview Avenue
City **Spartanburg** State **SC** Zip **29302**

Director Name **Thomas J. Malone**
Street Address
920 Milliken Road
City **Spartanburg** State **SC** Zip **29303**

Director Name
Street Address
City State Zip

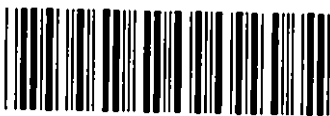
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
50 COMM \$100.00 PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
50 Common \$100.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 0 9 9 5 *

File Date: 2/7/03
Check No.: 004651

By: [Signature]
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

James F. Zahrn 2/3/03
Signature of Officer Date

James F. Zahrn
Print or Type Name of Officer

Secretary
Title of Officer

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **100995**
2. Name of Corporation **Sylvan Chemical Co., Inc.**

3. Street Address Principal Business Office **P. O. Box 1926, M-416**
City **Spartanburg** State **SC** Zip **29304**

4. Business Phone No. **(864) 503-2403**
5. State of Incorporation **DELAWARE**
6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island
Carpet Installation

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name **E. Wayne Hunter**
Street Address **201 Lukken Drive**
City **LaGrange** State **GA** Zip **30240**

Vice President Name **Ashley Allen**
Street Address **920 Milliken Road**
City **Spartanburg** State **SC** Zip **29303**

Secretary Name **James F. Zahrn**
Street Address **920 Milliken Road**
City **Spartanburg** State **SC** Zip **29303**

Treasurer Name **James F. Zahrn**
Street Address **920 Milliken Road**
City **Spartanburg** State **SC** Zip **29303**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name **Thomas J. Malone**
Street Address **920 Milliken Road**
City **Spartanburg** State **SC** Zip **29303**

Director Name **Roger Milliken**
Street Address **234 S. Fairview Ave.**
City **Spartanburg** State **SC** Zip **29302**

Director Name **E. Wayne Hunter**
Street Address **201 Lukken Drive**
City **LaGrange** State **GA** Zip **30240**

Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
50 COMM	\$100.00 PAR VAL	

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
50	Common	\$100.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 0 9 9 5 *

File Date: 1-31-02
Check No.: 4118
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of James F. Zahrn Date 1/25/02

James F. Zahrn
Print or Type Name of Officer
Secretary
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **100995** 2. Name of Corporation **Sylvan Chemical Co., Inc.**

3. Street Address Principal Business Office
P. O. Box 1926, M-416 City **Spartanburg** State **SC** Zip **29304**

4. Business Phone No. **(864) 503-2904** 5. State of Incorporation **DELAWARE** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island
Carpet Installation

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name E. Wayne Hunter	Vice President Name Ashley Allen
Street Address 201 Lukken Drive	Street Address 920 Milliken Road
City LaGrange State GA Zip 30240	City Spartanburg State SC Zip 29303

Secretary Name L. Heagney	Treasurer Name L. Heagney
Street Address 920 Milliken Road	Street Address 920 Milliken Road
City Spartanburg State SC Zip 29303	City Spartanburg State SC Zip 29303

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Thomas J. Malone	Director Name Roger Milliken
Street Address 920 Milliken Road	Street Address 234 S. Fairview Avenue
City Spartanburg State SC Zip 29303	City Spartanburg State SC Zip 29302

Director Name E. Wayne Hunter	Director Name
Street Address 201 Lukken Drive	Street Address
City LaGrange State GA Zip 30240	City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

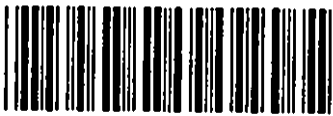
Number of Shares	Class/Series	Par Value
50	COMM	\$100.00

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
50	Common	\$100.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 0 0 9 9 5 *

File Date: 2/22/00
2963
Check No.: 2
By: _____

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

L. Heagney 2/17/00
Signature of Officer Date
L. Heagney
Print or Type Name of Officer
Secretary
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **100995** 2. Name of Corporation **Sylvan Chemical Co., Inc.**

3. Street Address Principal Business Office
P. O. Box 1926, M-416 City **Spartanburg** State **SC** Zip **29304**

4. Business Phone No. **(864) 503-2904** 5. State of Incorporation **DELAWARE** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island
Carpet Installation

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS

<p>President Name E. Wayne Hunter Street Address 201 Lukken Drive City State Zip LaGrange GA 30240</p> <p>Secretary Name L. Heagney Street Address 920 Milliken Road City State Zip Spartanburg SC 29303</p>	<p>Vice President Name Ashley Allen Street Address 920 Milliken Road City State Zip Spartanburg SC 29304</p> <p>Treasurer Name L. Heagney Street Address 920 Milliken Road City State Zip Spartanburg SC 29304</p>
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9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS

<p>Director Name Thomas J. Malone Street Address 920 Milliken Road City State Zip Spartanburg SC 29303</p> <p>Director Name E. Wayne Hunter Street Address 201 Lukken Drive City State Zip LaGrange GA 30240</p>	<p>Director Name Roger Milliken Street Address 234 S. Fairview Avenue City State Zip Spartanburg SC 29302</p>
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10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
50	COMM	\$100.00 PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

Number of Shares	Class/Series	Par Value
50	Common	\$100.00

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date: 12/19/99
2399
Check No.: 200
By: [Signature]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: [Signature] Date: 2/10/99
Print or Type Name of Officer: L. Heagney
Title of Officer: Secretary