

1.) CORPORATION NAME:

**MARSULEX INC.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**FN**

DUE DATE: **2/28/2011**

SCC ID NO: **F1007683**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	2,500,000
COMB	7,500,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 111 GORDON BAKER RD STE 300

CITY/ST/ZIP: TORONTO, ON M2H 3R1-CANADA

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LAURIE A. TUGMAN	
TITLE:	P/CEO	
ADDRESS:	1410 MARSHWOOD PLACE MISSISSAUGA, ONTARIO	
CITY/ST/ZIP/CO:	, -,	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RANDALL HULL	
TITLE:	SR VP DEV SALES	
ADDRESS:	22 SILK BAY PLACE	
CITY/ST/ZIP/CO:	THE WOODLANDS, TX 77382-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WILLIAM MARTIN	
TITLE:	CORP SECRETARY	
ADDRESS:	120 STATFORD CR TORANTO, ONTARIO M4N 1C8	
CITY/ST/ZIP/CO:	, -,	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	WILLIAM MARTIN	
TITLE:	CFO	
ADDRESS:	120 STRATFORD CRESCENT TORONTO, ONTARIO	
CITY/ST/ZIP/CO:	, -,	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KEITH MCLEOD	
TITLE:	VICE PRESIDENT	
ADDRESS:	2974 EDEN STONE ROAD N.W.	
CITY/ST/ZIP/CO:	CALGARY, AB T3A 3Y9-, CANADA	

NAME: RODERICK BARRETT TITLE: DIRECTOR ADDRESS: 110 CHELTENHAM AVENUE CITY/ST/ZIP/CO: TORONTO, ON M4N 1P9-, CANADA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM LAMBERT TITLE: DIRECTOR ADDRESS: 197 GLENCARIN AVE. CITY/ST/ZIP/CO: TORONTO, ON M4R 1N3-, CANADA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: IAN MATHESON TITLE: DIRECTOR ADDRESS: 2201 ROCKINGHAM DRIVE CITY/ST/ZIP/CO: OAKVILLE, ON L6H 6E8-, CANADA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN ROGERS TITLE: DIRECTOR ADDRESS: 7 EDENBRIDGE DRIVE CITY/ST/ZIP/CO: MISSISSAUGA, ON M9A 3E8-, CANADA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: LEE STEWART TITLE: DIRECTOR ADDRESS: 10 CEMETERY ROAD CITY/ST/ZIP/CO: SHARON, CT 06069-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM STEVENS TITLE: DIRECTOR ADDRESS: 71 COLIN AVENUE CITY/ST/ZIP/CO: TORONTO, ON M5P 2C1-, CANADA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL SALAMON TITLE: DIRECTOR ADDRESS: #710-18 LOWER VILLAGE CITY/ST/ZIP/CO: TORONTO, ON M5P3M1-, CANADA	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ WILLIAM MARTIN _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	WILLIAM MARTIN, CORP SECRETARY _____ PRINTED NAME AND CORPORATE TITLE
2/9/2011 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	