

1.) CORPORATION NAME:

**FutureFuel Chemical Company**

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1781535**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2800 GAP RD  
PO BOX 2357

CITY/ST/ZIP: BATESVILLE, AR 72503

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.

NAME:	LEE E MIKLES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	P O BOX 2357		
CITY/ST/ZIP/CO:	BATESVILLE, AR 72503		

NAME:	DAVID BAKER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	P O BOX 2357		
CITY/ST/ZIP/CO:	BATESVILLE, AR 72503		

NAME:	SAM DORTCH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	P.O. BOX 2357		
CITY/ST/ZIP/CO:	BATESVILLE, AR 72503		

NAME:	ROSE SPARKS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	P.O. BOX 2357		
CITY/ST/ZIP/CO:	BATESVILLE, AR 72503		

NAME:	STACEY NEMETH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	8235 FORSYTH BLVD STE 400		
CITY/ST/ZIP/CO:	CLAYTON, MO 63105		

NAME:	PAUL A NOVELLY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	8235 FORSYTH BLVD STE 400		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63105		

NAME: GARY MCCHESENEY TITLE: CHEIF TECH OFF ADDRESS: P.O. BOX 2357 CITY/ST/ZIP/CO: BATESVILLE, AR 72503	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: CHRIS SCHMIDT TITLE: CFO ADDRESS: 8235 FORSYTH BLVD STE 400 CITY/ST/ZIP/CO: CLAYTON, MO 63105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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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/ ROSE SPARKS	ROSE SPARKS, SECRETARY	1/18/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.