Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2009

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 04/01/2009 and ending 03/31/2010

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
FLORIDA CRYSTALS CORPORATION PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 04/01/1974

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
FLORIDA CRYSTALS CORPORATION

P.O. BOX 3435
WEST PALM BEACH, FL 33401

ONE N. CLEMATIS ST., STE 200
WEST PALM BEACH, FL 33401

2b Employer Identification Number (EIN)
65-0773338

2c Sponsor's telephone number
561-655-6303

2d Business code (see instructions)
311300

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	01/12/2011	ERIK J. BLOMQVIST
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
FLORIDA CRYSTALS CORPORATION

P.O. BOX 3435
WEST PALM BEACH, FL 33401

3b Administrator's EIN
65-0773338

3c Administrator's telephone number
561-655-6303

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	1353
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	769
b	Retired or separated participants receiving benefits	**6b**	223
c	Other retired or separated participants entitled to future benefits	**6c**	252
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	1244
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	52
f	Total. Add lines **6d** and **6e**	**6f**	1296
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	2
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1A 1G

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

(1)	X	**R** (Retirement Plan Information)
(2)		**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)	X	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	X	**H** (Financial Information)
(2)		**I** (Financial Information – Small Plan)
(3)		**A** (Insurance Information)
(4)		**C** (Service Provider Information)
(5)		**D** (DFE/Participating Plan Information)
(6)		**G** (Financial Transaction Schedules)

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 04/01/2009 and ending 03/31/2010

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
FLORIDA CRYSTALS CORPORATION PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
FLORIDA CRYSTALS CORPORATION

D Employer Identification Number (EIN)
65-0773338

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 04 Day 01 Year 2009

2 Assets:

a	Market value	**2a**	42138016
b	Actuarial value	**2b**	46351818

3 Funding target/participant count breakdown

			(1) Number of participants	**(2)** Funding Target
a	For retired participants and beneficiaries receiving payment	**3a**	268	15334585
b	For terminated vested participants	**3b**	341	5298308
c	For active participants:			
	(1) Non-vested benefits	**3c(1)**		4272692
	(2) Vested benefits	**3c(2)**		18716918
	(3) Total active	**3c(3)**	744	22989610
d	Total	**3d**	1353	43622503

4 If the plan is at-risk, check the box and complete items (a) and (b) [ ]

a	Funding target disregarding prescribed at-risk assumptions	**4a**	
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	**4b**	

5	Effective interest rate	**5**	7.52 %
6	Target normal cost	**6**	1956339

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

Signature of actuary	11/29/2010 Date
HELEN NETHERTON Type or print name of actuary	08-04078 Most recent enrollment number
TOWERS WATSON DELAWARE INC. Firm name	786-552-1100 Telephone number (including area code)
255 ALHAMBRA CIRCLE, SUITE 950 CORAL GABLES, FL 33134 Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	6049877	
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	2075934	
9	Amount remaining (Item 7 minus item 8)	3973943	
10	Interest on item 9 using prior year's actual return of -17.93 %	-712449	
11	Prior year's excess contributions to be added to prefunding balance:		
	a Excess contributions (Item 38 from prior year)		
	b Interest on (a) using prior year's effective rate of 6.20 %		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		
12	Reduction in balances due to elections or deemed elections		
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12)	3261494	0

Part III Funding percentages

14	Funding target attainment percentage	14	98.78 %
15	Adjusted funding target attainment percentage	15	106.25 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	112.81 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
02/22/2010	3500000				
			Totals ► 18(b)	3500000	18(c)

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contribution from prior years.	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3280851

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:

a Segment rates:

1st segment: %	2nd segment: %	3rd segment: %	[X] N/A, full yield curve used

b Applicable month (enter code) **21b** 1

22 Weighted average retirement age **22** 67

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] Prescribed - separate [ ] Substitute

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ..... [ ] Yes [X] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ..... [X] Yes [ ] No

26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment..... [X] Yes [ ] No

27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment..... **27**

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years **28**

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a)..... **29**

30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)..... **30** 0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)..... **31** 1956339

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment		
b Waiver amortization installment.....		

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount **33**

34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33)..... **34** 1956339

	Carryover balance	Prefunding balance	Total balance
35 Balances used to offset funding requirement			

36 Additional cash requirement (item 34 minus item 35)..... **36** 1956339

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c)..... **37** 3280851

38 Interest-adjusted excess contributions for current year (see instructions)..... **38** 1324512

39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)..... **39**

40 Unpaid minimum required contribution for all years **40**

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 04/01/2009 and ending 03/31/2010

A Name of plan
FLORIDA CRYSTALS CORPORATION PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
FLORIDA CRYSTALS CORPORATION

D Employer Identification Number (EIN)
65-0773338

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	76038	67782
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	3854936	2086388
(2) U.S. Government securities	1c(2)	6080348	4266862
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	1521597	2209313
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	3327535	5595304
(5) Partnership/joint venture interests	1c(5)	16337270	19520736
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	10941690	17016439
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	42139414	50762824
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	1398	1408
k	Total liabilities (add all amounts in lines 1g through1j)	1k	1398	1408
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	42138016	50761416

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	3500000	
	(B) Participants	2a(1)(B)		
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		3500000
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	2066	
	(B) U.S. Government securities	2b(1)(B)	279466	
	(C) Corporate debt instruments	2b(1)(C)	101355	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		382887
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	83938	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		83938
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	22142838	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	22351059	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-208221

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	4060374	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		4060374
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		4001180
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		11820158
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3196758	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		3196758
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3196758
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		8623400
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [ ] Unqualified (2) [ ] Qualified (3) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: MORGAN,JACOBY, THURN, BOYLE & ASSOC (2) EIN: 65-0761640

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. (2) [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		10000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j	X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 04/01/2009 and ending 03/31/2010

A Name of plan
FLORIDA CRYSTALS CORPORATION PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
FLORIDA CRYSTALS CORPORATION

D Employer Identification Number (EIN)
65-0773338

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1**

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): _____ _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3** 90

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☒ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☒ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

MJTB

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Financial Statements and Supplemental Schedules

March 31, 2010 and 2009

(With Independent Auditors' Report Thereon)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

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MJTB
Morgan • Jacoby • Thurn • Boyle
& Associates, P.A.
Certified Public Accountants

Independent Auditors' Report

The Pension Plan Committee
Florida Crystals Corporation Pension Plan:

We were engaged to audit the accompanying statements of net assets available for benefits of the Florida Crystals Corporation Pension Plan (the Plan) as of March 31, 2010 and 2009, and the related statements of changes in net assets available for benefits for the years then ended, the statements of accumulated plan benefits as of March 31, 2010 and 2009, and the related statements of changes in accumulated plan benefits for the years then ended, and the supplemental schedules of assets held at end of year and reportable transactions as of and for the year ended March 31, 2010. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to information certified by Wells Fargo Bank, N.A. (formerly Wachovia Bank, N.A.), the Trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the Trustee as of March 31, 2010 and 2009 and for the years then ended that the information provided to the Plan administrator by the Trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Morgan, Jacoby, Thurn, Boyle & Associates, P.A.

December 23, 2010

700 - 20th Street • Vero Beach, Florida 32960 • Phone 772-562-4158 • Telefax 772-563-2024 • www.mjtbcpa.com

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Statements of Net Assets Available for Benefits

March 31, 2010 and 2009

		2010	2009
Assets:			
Investments at fair value	$	50,695,042	42,063,376
Accrued interest receivable		67,782	76,038
Total assets		50,762,824	42,139,414
Liabilities:			
Due to brokers for investments purchased		1,408	1,398
Net assets available for benefits	$	50,761,416	42,138,016

See accompanying notes to financial statements.

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Statements of Changes in Net Assets Available for Benefits

Years ended March 31, 2010 and 2009

		2010	2009
Additions attributed to:			
Investment income (loss):			
Net appreciation (depreciation) in fair value of investments	$	7,394,438	(10,295,454)
Interest and dividend income		925,720	898,550
Net investment income (loss)		8,320,158	(9,396,904)
Employer contributions		3,500,000	–
Total additions (net loss)		11,820,158	(9,396,904)
Deductions – benefits paid directly to participants		(3,196,758)	(1,758,358)
Net increase (decrease)		8,623,400	(11,155,262)
Net assets available for benefits:			
Beginning of year		42,138,016	53,293,278
End of year	$	50,761,416	42,138,016

See accompanying notes to financial statements.

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Statements of Accumulated Plan Benefits

March 31, 2010 and 2009

		2010	2009
Actuarial present value of accumulated plan benefits:			
Vested benefits:			
Participants currently receiving payments	$	16,861,592	14,703,593
Other participants		24,676,330	23,538,376
		41,537,922	38,241,969
Nonvested benefits		1,095,292	2,288,813
Total actuarial present value of accumulated plan benefits	$	42,633,214	40,530,782

See accompanying notes to financial statements.

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Statements of Changes in Accumulated Plan Benefits

Years ended March 31, 2010 and 2009

		2010	2009
Actuarial present value of accumulated plan benefits at beginning of year	$	40,530,782	37,621,261
Increase (decrease) during the year attributable to:			
Benefits accumulated		2,145,495	1,708,095
Benefits paid		(3,196,758)	(1,758,358)
Decrease in discount period		3,153,695	2,959,784
Net increase		2,102,432	2,909,521
Actuarial present value of accumulated plan benefits at end of year	$	42,633,214	40,530,782

See accompanying notes to financial statements.

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Notes to Financial Statements

March 31, 2010 and 2009

(1) Description of Plan

The following brief description of Florida Crystals Corporation Pension Plan (the Plan) is provided for general informational purposes only. Participants should refer to the Plan agreement for more complete information.

(a) General

The Plan is a noncontributory, defined-benefit pension plan covering substantially all nonunion employees of several affiliated companies, as defined in the Plan document and corresponding amendments, except any foreign worker who had not become a participant prior to April 1, 1982. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan's trustee is Wells Fargo Bank, N.A. ("Wells Fargo"), formerly Wachovia Bank, N.A. Wells Fargo also serves as recordkeeper for the Plan.

(b) Eligibility

Any employee of a participating employer as defined in the Plan document and corresponding amendments is eligible for participation in the Plan, except for employees covered by a collective bargaining agreement, certain workers as defined in Section 410(b)(3)(c) of the Internal Revenue Code (IRC), or anyone participating in the Florida Crystals Corporation Pension Plan for Bargaining Unit Employees. Eligible participation begins on the April 1 or October 1 following attainment of age 21 and completion of one year of service in which at least 1,000 hours are worked.

(c) Vesting

An employee's accrued benefits vest upon the earlier of (a) when they have received credit for five years of vesting service, or (b) the participant's normal retirement age if the participant is an employee at that time.

(d) Benefits

Employees are eligible for normal retirement benefits beginning at the later of attainment of age 65 or the fifth anniversary of the date of participation. The Plan provides for early retirement at age 55 and completion of ten years of credited service with reduced benefits. Benefits are insured by the Pension Benefit Guaranty Corporation (PBGC) subject to certain limitations by ERISA.

Participants are entitled to annual pension benefits beginning at the early, normal, or late retirement date calculated based on a formula based primarily on their highest average compensation for five consecutive complete calendar years out of ten years of credited service immediately preceding the calendar year of the employee's date of termination of employment or retirement, whichever is earlier.

(Continued)

The normal retirement benefit amount is calculated as the sum of 0.7% of 5-year average pay including bonus up to $18,600 and 1.1% of 5-year average pay including bonus above $18,600, subject to compensation limits as provided by the Internal Revenue Code, multiplied by credited service up to a maximum of 30 years. The early retirement benefit amount is calculated as a reduced fraction of the normal retirement benefit amount depending on the age of retirement.

Upon the death of a vested employee with an eligible spouse, a monthly life annuity is payable to the surviving spouse equal to 100% of the benefit the employee would have received assuming the individual had terminated employment on the actual date of death, survived to the earliest age the individual would be eligible for retirement, and retired at that time with a 100% joint and survivor annuity. Active participants who become disabled shall only be entitled to the normal retirement benefits they have accumulated as of the time they become disabled.

(e) Administration

The Plan is administered by the pension committee appointed by the Board of Directors of Florida Crystals Corporation. Certain administrative expenses of the Plan were paid by the employer.

(f) Termination of the Plan

In the event of termination of the Plan, the net assets of the Plan will be allocated, as prescribed by ERISA and related regulations, generally to provide the following benefits in the order indicated:

- Annuity benefits former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
- Other vested benefits insured by PBGC up to the applicable limitations as discussed below.
- All other vested benefits not insured by PBGC.
- All nonvested benefits.

Certain benefits under the Plan are insured by PBGC if the Plan terminates. Generally the PBGC guarantees most vested normal-age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling on the amount of an individual's monthly benefit PBGC guarantees.

(Continued)

Whether all participants receive their benefits, should the Plan terminate at some future time, will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, and may also depend on the level of benefits guaranteed by PBGC.

If, however, the Plan is terminated for any reason other than the bankruptcy of the Plan's sponsor and the Plan has insufficient assets, the sponsor will be required to pay to the Plan an amount that together with Plan assets will satisfy all benefits accumulated to the date of the Plan termination. In the event of termination of the Plan, any residual assets of the Plan remaining after the satisfaction of all benefits and liabilities shall be distributed to the sponsor on whose behalf the Plan is being terminated.

(g) Party-in-Interest Transactions

Certain Plan assets are invested in money market funds managed by Wells Fargo. Wells Fargo is a trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

(h) Funding Policy

The employer's funding policy is to make annual contributions to the Plan as determined by the Plan's independent actuary. No employee contributions are permitted. The employer's contributions, if any, for the years ended March 31, 2010 and 2009 complied with the minimum funding requirements of ERISA.

(2) Summary of Significant Accounting Policies

(a) Basis of Accounting

The financial statements of the Plan have been prepared on the accrual basis of accounting.

(b) Investment Valuation and Income Recognition

Investments are valued at quoted market prices except for the investments in limited partnerships. The limited partnerships' market values are provided by the partnerships' general partners. In determining the market values, the general partners utilize the net asset valuations of the underlying investment entities.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

(Continued)

The Plan's investments are invested in various types of investment securities and in various companies within various markets. Investment securities are exposed to several risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and such changes could materially affect the amounts reported in the Plan's financial statements and schedules.

(c) Actuarial Present Value of Accumulated Plan Benefits and Assumptions

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to:

- Retired or terminated employees or their beneficiaries;
- Beneficiaries of employees who have died; and
- Present employees or their beneficiaries.

Benefits under the Plan are based on employees' compensation as defined in the Plan document. The actuarial present value of accumulated plan benefits was determined as of March 31, 2010 and 2009 by consulting actuaries. The significant assumptions underlying the actuarial computations are as follows:

- Assumed rate of return – 7.75% per annum, compounded annually;
- Mortality basis – the RP 2000 Combined Healthy Mortality Tables in 2009 and the 1994 Uninsured Pensioners Mortality Table in 2008; and
- Retirement age – greater of normal retirement age (65 to 70) or age on the valuation date.

The foregoing actuarial assumptions are based on the assumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

(d) Use of Estimates

Management has made a number of estimates and assumptions relating to the determination of the actuarial present value of accumulated plan benefits, the reporting of assets and liabilities, and the disclosure of contingent assets and liabilities to prepare these financial statements in conformity with accounting principles generally accepted in the United States of America. Actual results could differ from those estimates.

(Continued)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Notes to Financial Statements

(3) Investments (Unaudited)

Plan assets are invested in various funds and limited partnerships. Short-term investments represent principally money market investments. Fixed income securities represent intermediate and long-term bonds, which receive guaranteed levels of investment earnings. The pension committee has received certifications from Wells Fargo, as Trustee, as to all data appearing in the financial statements except information relating to the following: (a) actuarial information, (b) determination of the amounts to be contributed by the employer, if any, (c) tax status of trust, and (d) determination of the amounts of benefits paid or payable to terminees at the direction of the employers.

Investments held at March 31, 2010 and 2009 by general type are as follows:

		2010	2009
Short term investments	$	2,086,388	3,854,936
Fixed income investments		6,918,580	8,020,810
Equity investments		14,792,684	8,909,276
Balanced and other investment funds		7,376,654	4,941,084
Limited partnerships		19,520,736	16,337,270
Total	$	50,695,042	42,063,376

The fair market values of individual assets that represent 5% or more of the Plan's net assets as of March 31, 2010 or 2009 are as follows:

		2010	2009
Optima Fund Management Limited Partnership	$	7,189,296	6,534,533
PIMCO Funds Pac Investment Management Service All Asset Fund		5,194,410	4,008,827
Jana Offshore Partners, Ltd. Class A Series		3,830,593	3,219,387
The Platinum Fund Limited Class A		2,809,002	1,872,957
Tiger Global Limited Series 1 Class C		2,801,159	3,116,978
Evergreen Institutional Treasury Money Market Fund		2,086,388	3,854,936

Net appreciation (depreciation) (including gains and losses on investments bought and sold as well as held during the year) in fair value of investments for the years ended March 31, 2010 and 2009 are as follows:

		2010	2009
Fixed income investments	$	208,049	(235,598)
Equity investments		3,773,780	(4,624,518)
Balanced and other investment funds		967,192	(1,845,869)
Limited partnership investments		2,445,417	(3,589,469)
	$	7,394,438	(10,295,454)

(Continued)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Notes to Financial Statements

(4) Fair Value of Investments

The Plan follows the authoritative guidance for accounting for fair value measurements. The guidance establishes a framework for fair value and expands disclosure about fair value measurements. It also requires that assets and liabilities carried at fair value be classified and disclosed in one of the following categories based on the quality and reliability of that information:

Level 1 – Observable inputs that reflect quoted prices (unadjusted) for identical assets or liabilities in active markets.

Level 2 – Inputs other than quoted prices included in Level 1 that are observable for the asset or liability either directly or indirectly.

Level 3 – Unobservable inputs reflecting management's own assumptions about the inputs used in pricing the asset and liability.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value:

Mutual funds – valued at quoted prices in active markets in which the securities are traded or at the net asset value of shares held by the Plan at year end.

Corporate debt, U.S. Government securities and mortgage-backed securities – valued quoted prices in active markets in which the securities are traded.

Common stocks – valued at quoted prices in active markets in which the securities are traded.

Limited partnerships – valued at the net asset valuations of the underlying investment entities.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

(Continued)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Notes to Financial Statements

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of March 31, 2010:

		Level 1	Level 2	Level 3	Total
Mutual funds	$	13,484,624	5,618,203	–	19,102,827
U.S. government securities		1,632,342	–	–	1,632,342
Mortgage-backed securities		2,634,520	–	–	2,634,520
Corporate debt		2,209,313	–	–	2,209,313
Common stocks		5,595,304	–	–	5,595,304
Limited partnerships		–	–	19,520,736	19,520,736
Totals	$	25,556,103	5,618,203	19,520,736	50,695,042

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of March 31, 2009:

		Level 1	Level 2	Level 3	Total
Mutual funds	$	8,244,623	6,552,002	–	14,796,625
U.S. government securities		2,644,296	–	–	2,644,296
Mortgage-backed securities		3,436,053	–	–	3,436,053
Corporate debt		1,521,597	–	–	1,521,597
Common stocks		3,327,535	–	–	3,327,535
Limited partnerships		–	–	16,337,270	16,337,270
Totals	$	19,174,104	6,552,002	16,337,270	42,063,376

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended March 31, 2010 and 2009:

		Limited Partnerships	
		2010	**2009**
Balance, beginning of year	$	16,337,270	22,015,896
Net appreciation (depreciation) in fair value of investments		2,445,417	(3,589,469)
Purchases, sales, issuances and settlements, net		738,049	(2,089,157)
Balance, end of year	$	19,520,736	16,337,270

(5) Tax Status

The Internal Revenue Service has determined and informed Florida Crystals Corporation by letter dated July 9, 2003 that the Plan and related trust are designed in accordance with applicable sections of Internal Revenue Code (IRC). The Plan administrator believes the Plan is designed and is currently being operated in compliance with the applicable provisions of the IRC.

(Continued)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Notes to Financial Statements

(6) Subsequent Events

In preparing these financial statements, management has evaluated subsequent events and transactions for potential disclosure through December 23, 2010, and determined there are no other items to disclose.

Schedule I

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year)

March 31, 2010

Description	Maturity date	Cost	Current value
Short-term investments:			
*Evergreen Institutional Treasury Money Market Fund		$ 2,086,388	2,086,388
Fixed income investments:			
Federal Farm Credit Bank Bond (5.2%)	3/20/2013	203,884	219,062
Untied States Treasury NTS Nt (5.125%)	5/15/2016	248,438	280,585
FHLB Bd Dtd (4.75%)	12/16/2016	380,975	374,720
Federal Natl Mtg Assn Nt (4.125%)	2/7/2018	186,872	200,188
Federal Home Ln Mtg Corp Partn Pool (5%)	5/1/2010	14,039	13,955
Federal Home Ln Mtg Corp Partn Pool (5.5%)	12/1/2017	50,720	52,927
Federal Natl Mtg Assn Gtd Mtg Pool (5.5%)	12/1/2017	59,465	62,616
Federal Home Ln Mtg Corp Partn Pool (4.5%)	2/1/2020	104,612	110,095
Federal Natl Mtg Assn Pool (4.5%)	11/1/2025	267,851	278,389
Federal Natl Mtg Assn Pool (6%)	6/1/2027	59,599	61,810
Federal Natl Mtg Assn Pool (6%)	1/1/2028	156,997	164,797
Federal Home Ln Mtg Corp Pool (6%)	3/1/2028	125,816	134,738
Federal Natl Mtg Assn Gtd Mtg Pool (6%)	1/1/2032	34,743	37,811
Federal Natl Mtg Assn Gtd Mtg Pool (6.5%)	3/1/2032	9,128	9,953
Federal Natl Mtg Assn Gtd Mtg Pool (5.5%)	9/1/2032	79,363	83,326
Federal Natl Mtg Assn Gtd Mtg Pool (4.274%)	11/1/2033	69,393	71,762
Federal Natl Mtg Assn Gtd Mtg Pool (2.7%)	12/1/2033	40,406	41,111
Federal Home Ln Mtg Corp Partn Pool (5.17%)	4/1/2035	83,579	84,556
Federal Home Ln Mtg Corp Partn Pool (5%)	12/1/2035	140,524	151,142
Federal natl Mtg Assn Gtd Mtg Pool (5.5%)	4/1/2036	200,221	216,434
Federal Natl Mtg Assn Pool (5.5%)	1/1/2037	184,461	196,208
Federal Natl Mtg Assn Pool (5%)	3/1/2037	163,464	176,102
Federal Natl Mtg Assn Pool (6%)	3/1/2037	314,143	331,992
Federal Natl Mtg Assn Pool (5%)	6/1/2039	196,460	196,079
United States Treasury Inflation Index Bond (2.5%)	7/15/2016	268,883	292,506
United States Treasury (2.125%)	1/15/2019	272,407	265,281
Berkley WR Corp SR NTS (5.125%)	9/30/2010	101,967	101,228
Baltimore Gas & Electric Co Medium (6.73%)	6/12/2012	103,500	107,329
MBNA Amer Bk Natl Assn Bd (7.125%)	11/15/2012	114,113	109,570
General Electric Co Bd (5%)	2/1/2013	80,293	80,848
Kraft Foods Inc SR Unsecured NTS (6%)	2/11/2013	77,029	82,316
Weatherford Intl Inc NT (5.15%)	3/15/2013	68,746	79,693
ICI Wilmington Inc Bd (5.625%)	12/1/2013	99,600	106,913
Paccar Inc NT (6.875%)	2/15/2014	77,326	85,571
Caterpillar Finl Svcs Corp SR (6.125%)	2/17/2014	75,352	84,521
America Movil SAB DE C V Bd (5.5%)	3/1/2014	100,142	108,067
Potash Corp Sask Inc Sr Unsecured (5.25%)	5/15/2014	72,671	75,677

(Continued)

Schedule I

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year) (Continued)

Description	Maturity date	Cost	Current value
Fixed income investments, continued:			
Schwab Charles Corp New Sr (4.95%)	6/1/2014	75,451	79,967
Block Finl Corp Bd (5.125%)	10/30/2014	74,831	77,861
Consolidated Nat Gas Co Bd (5%)	12/1/2014	79,815	79,921
Berkshire Hathaway Inc Del Sr (3.2%)	2/11/2015	74,938	75,641
Oneok Partners LP Bd (6.15%)	10/1/2016	75,825	80,543
Comcast Hldgs Inc Bd (6.5%)	1/15/2017	99,984	111,171
Bank of America Corp Sr Unsecured (4%)	3/23/2017	100,000	99,461
GTE Corp Deb (6.84%)	4/15/2018	74,438	82,814
PPL Energy Supply LLC Sr Unsecd (6.5%)	5/1/2018	84,490	90,572
Duke Cap Corp Sr NT (6.75%)	7/15/2018	72,469	81,185
Barrick NA Finance LLC Nt (6.8%)	9/15/2018	85,577	85,545
FPL GRP Cap Inc NT (6%)	3/1/2019	78,042	80,315
Dupont E I De Nemours & Co Sr NT (5.75%)	3/15/2019	73,317	81,549
Norfolk Southern Corp NTS (5.9%)	6/15/2019	75,879	81,034
Brown Cardinal Small Companies Brown Advisory Inter Bd		427,944	442,406
Government Natl Mtg Assn Pool (5.5%)	2/15/2033	155,493	158,717
		6,595,675	6,918,580
Equity investments:			
AT&T Inc Com		208,726	176,952
Abbott Labs Com		92,790	111,049
Adobe Sys Inc Com		125,305	119,904
Alcoa Inc Com		141,885	123,133
America Movil SAB De C.V.		137,279	129,424
American Elec Pwr Co Inc Com		107,547	115,255
Apple Inc Com		84,174	135,360
Bank of America Corp Com		109,342	127,217
Bank of New York Mellon Corp Com		131,323	123,613
Baxter Intl Inc Com		76,042	115,935
CVS/Caremark Corp Com		92,179	122,001
Cisco Sys Inc Com		166,018	184,553
Coca-Cola Co Com		110,661	113,795
Conocophillips Com		128,364	121,273
Disney (Walt) Company Holding Company Com		102,986	128,015
Dollar Tree Inc Com		91,566	120,750
Exxon Mobil Corp Com		181,029	234,028
General Electric Co Com		167,049	129,784
Homefed Corp Com		541	8,188
JP Morgan Chase & Co Com		206,691	254,046
Johnson & Johnson Com		117,398	116,708

Schedule I

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year) (Continued)

Description	Maturity date	Cost	Current value
Equity investments, continued:			
Lockheed Martin Corp Com		118,349	122,333
Metlife Inc Com		94,468	125,989
Microsoft Corp Com		176,365	180,030
Monsanto Co Com		129,749	119,200
Norfolk Southern Corp Com		174,044	183,543
Occidental Pete Corp Com		112,148	121,061
Oracle Corp Com		106,990	119,037
PNC Financial Services Group Inc Com		136,683	129,310
Pepsico Inc Com		145,578	182,469
Philip Morris Intl Inc Com		148,650	179,900
Prudential Financial Inc Com		161,117	135,823
Qualcomm Inc Com		134,356	123,446
Schlumberger Ltd Com		113,866	118,797
Suncor Energy Inc Com		66,586	126,418
3M Co Com		75,800	118,753
United Technologies Corp Com		102,952	123,150
Wal-Mart Stores Inc Com		216,791	235,411
Wisconsin Energy Corp Com		111,217	114,038
Covidien Plc Com		95,194	114,387
Weatherford International Ltd Com		164,210	111,226
Fifth Avenue Technology Growth Offshore Fd		137,167	13,016
Fifth Avenue Technology Global Equity Offshore Fd		1,862,315	2,250,924
Fifth Avenue Technology Growth Offshore Fd		1,042,282	1,267,875
Ishares Nasdaq Biotechnology Index Fd		157,861	183,881
Ishares Russell 1000 Value Index Fd		749,011	800,017
Ishares Russell 1000 Growth Index Fd		751,842	794,835
Powershares QQQ ETF		1,287,702	1,632,528
SPDR S&P 500 ETF Trust		1,645,632	1,638,000
SPDR S&P Midcap 400 ETF Trust		512,382	616,304
		13,310,202	14,792,684
Balanced and other investment funds:			
Old Westbury Real Return Fd		2,358,111	2,182,244
PIMCO All Asset Fd Instl Cl		5,570,585	5,194,410
		7,928,696	7,376,654
Limited Partnerships:			
Aqua Bluegate CMBS Venture I, L.P.		412,487	498,714
Jana Offshore Partners, Ltd. Class B2 Series		92,317	100,086
The Platinum Fund Limited Class A		1,780,455	2,809,002
Snow, Phipps & Guggenheim, LP		1,992,840	2,274,490

(Continued)

Schedule I

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year) (Continued)

Description	Maturity date	Cost	Current value
Limited Partnerships, continued:			
Jana Offshore Partners, Ltd. Class A Series		3,247,676	3,830,593
Tiger Global Ltd Series 1 Class C		2,000,000	2,801,159
Jana Offshore Partners, Ltd Class B Series		62,303	17,396
Optima FD Mgmt Ltd Partnership		2,457,773	7,189,296
		12,045,851	19,520,736
		$ 41,966,812	50,695,042

*Denotes a party-in-interest transaction with Wells Fargo Bank, N.A.

Schedule II

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4j – Schedule of Reportable Transactions

Year ended March 31, 2010

Description	Purchase Price	Sales Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Short-term investments:					
*Evergreen Treasury Money Market Fund	$ 14,034,506	–	–	14,034,506	–
*Evergreen Treasury Money Market Fund	–	15,839,584	15,839,584	15,839,584	–

*Denotes a party-in-interest transaction with Wells Fargo Bank, N.A.

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year)

March 31, 2010

E.I.N. #65-0773338

Description	Maturity date	Cost	Current value
Short-term investments:			
*Evergreen Institutional Treasury Money Market Fund		$ 2,086,388	2,086,388
Fixed income investments:			
Federal Farm Credit Bank Bond (5.2%)	3/20/2013	203,884	219,062
Untied States Treasury NTS Nt (5.125%)	5/15/2016	248,438	280,585
FHLB Bd Dtd (4.75%)	12/16/2016	380,975	374,720
Federal Natl Mtg Assn Nt (4.125%)	2/7/2018	186,872	200,188
Federal Home Ln Mtg Corp Partn Pool (5%)	5/1/2010	14,039	13,955
Federal Home Ln Mtg Corp Partn Pool (5.5%)	12/1/2017	50,720	52,927
Federal Natl Mtg Assn Gtd Mtg Pool (5.5%)	12/1/2017	59,465	62,616
Federal Home Ln Mtg Corp Partn Pool (4.5%)	2/1/2020	104,612	110,095
Federal Natl Mtg Assn Pool (4.5%)	11/1/2025	267,851	278,389
Federal Natl Mtg Assn Pool (6%)	6/1/2027	59,599	61,810
Federal Natl Mtg Assn Pool (6%)	1/1/2028	156,997	164,797
Federal Home Ln Mtg Corp Pool (6%)	3/1/2028	125,816	134,738
Federal Natl Mtg Assn Gtd Mtg Pool (6%)	1/1/2032	34,743	37,811
Federal Natl Mtg Assn Gtd Mtg Pool (6.5%)	3/1/2032	9,128	9,953
Federal Natl Mtg Assn Gtd Mtg Pool (5.5%)	9/1/2032	79,363	83,326
Federal Natl Mtg Assn Gtd Mtg Pool (4.274%)	11/1/2033	69,393	71,762
Federal Natl Mtg Assn Gtd Mtg Pool (2.7%)	12/1/2033	40,406	41,111
Federal Home Ln Mtg Corp Partn Pool (5.17%)	4/1/2035	83,579	84,556
Federal Home Ln Mtg Corp Partn Pool (5%)	12/1/2035	140,524	151,142
Federal natl Mtg Assn Gtd Mtg Pool (5.5%)	4/1/2036	200,221	216,434
Federal Natl Mtg Assn Pool (5.5%)	1/1/2037	184,461	196,208
Federal Natl Mtg Assn Pool (5%)	3/1/2037	163,464	176,102
Federal Natl Mtg Assn Pool (6%)	3/1/2037	314,143	331,992
Federal Natl Mtg Assn Pool (5%)	6/1/2039	196,460	196,079
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United States Treasury (2.125%)	1/15/2019	272,407	265,281
Berkley WR Corp SR NTS (5.125%)	9/30/2010	101,967	101,228
Baltimore Gas & Electric Co Medium (6.73%)	6/12/2012	103,500	107,329
MBNA Amer Bk Natl Assn Bd (7.125%)	11/15/2012	114,113	109,570
General Electric Co Bd (5%)	2/1/2013	80,293	80,848
Kraft Foods Inc SR Unsecured NTS (6%)	2/11/2013	77,029	82,316
Weatherford Intl Inc NT (5.15%)	3/15/2013	68,746	79,693
ICI Wilmington Inc Bd (5.625%)	12/1/2013	99,600	106,913
Paccar Inc NT (6.875%)	2/15/2014	77,326	85,571
Caterpillar Finl Svcs Corp SR (6.125%)	2/17/2014	75,352	84,521
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(Continued)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year) (Continued)

E.I.N. #65-0773338

Description	Maturity date	Cost	Current value
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Comcast Hldgs Inc Bd (6.5%)	1/15/2017	99,984	111,171
Bank of America Corp Sr Unsecured (4%)	3/23/2017	100,000	99,461
GTE Corp Deb (6.84%)	4/15/2018	74,438	82,814
PPL Energy Supply LLC Sr Unsecd (6.5%)	5/1/2018	84,490	90,572
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Barrick NA Finance LLC Nt (6.8%)	9/15/2018	85,577	85,545
FPL GRP Cap Inc NT (6%)	3/1/2019	78,042	80,315
Dupont E I De Nemours & Co Sr NT (5.75%)	3/15/2019	73,317	81,549
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		6,595,675	6,918,580
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Alcoa Inc Com		141,885	123,133
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American Elec Pwr Co Inc Com		107,547	115,255
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Bank of America Corp Com		109,342	127,217
Bank of New York Mellon Corp Com		131,323	123,613
Baxter Intl Inc Com		76,042	115,935
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Cisco Sys Inc Com		166,018	184,553
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JP Morgan Chase & Co Com		206,691	254,046
Johnson & Johnson Com		117,398	116,708

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year) (Continued)

E.I.N. #65-0773338

Description	Maturity date	Cost	Current value
Equity investments, continued:			
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Metlife Inc Com		94,468	125,989
Microsoft Corp Com		176,365	180,030
Monsanto Co Com		129,749	119,200
Norfolk Southern Corp Com		174,044	183,543
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Oracle Corp Com		106,990	119,037
PNC Financial Services Group Inc Com		136,683	129,310
Pepsico Inc Com		145,578	182,469
Philip Morris Intl Inc Com		148,650	179,900
Prudential Financial Inc Com		161,117	135,823
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Schlumberger Ltd Com		113,866	118,797
Suncor Energy Inc Com		66,586	126,418
3M Co Com		75,800	118,753
United Technologies Corp Com		102,952	123,150
Wal-Mart Stores Inc Com		216,791	235,411
Wisconsin Energy Corp Com		111,217	114,038
Covidien Plc Com		95,194	114,387
Weatherford International Ltd Com		164,210	111,226
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Fifth Avenue Technology Growth Offshore Fd		1,042,282	1,267,875
Ishares Nasdaq Biotechnology Index Fd		157,861	183,881
Ishares Russell 1000 Value Index Fd		749,011	800,017
Ishares Russell 1000 Growth Index Fd		751,842	794,835
Powershares QQQ ETF		1,287,702	1,632,528
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SPDR S&P Midcap 400 ETF Trust		512,382	616,304
		13,310,202	14,792,684
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Old Westbury Real Return Fd		2,358,111	2,182,244
PIMCO All Asset Fd Instl Cl		5,570,585	5,194,410
		7,928,696	7,376,654
Limited Partnerships:			
Aqua Bluegate CMBS Venture I, L.P.		412,487	498,714
Jana Offshore Partners, Ltd. Class B2 Series		92,317	100,086
The Platinum Fund Limited Class A		1,780,455	2,809,002
Snow, Phipps & Guggenheim, LP		1,992,840	2,274,490

(Continued)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4i – Schedule of Assets (Held At End of Year) (Continued)

E.I.N. #65-0773338

Description	Maturity date	Cost	Current value
Limited Partnerships, continued:			
Jana Offshore Partners, Ltd. Class A Series		3,247,676	3,830,593
Tiger Global Ltd Series 1 Class C		2,000,000	2,801,159
Jana Offshore Partners, Ltd Class B Series		62,303	17,396
Optima FD Mgmt Ltd Partnership		2,457,773	7,189,296
		12,045,851	19,520,736
		$ 41,966,812	50,695,042

*Denotes a party-in-interest transaction with Wells Fargo Bank, N.A.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26
Schedule of Active Participant Data as of April 1, 2009

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		20		1		0		0		0		0		0		0		0	
25 - 29	0		40		9		0		0		0		0		0		0		0	
30 - 34	0		20		11		4		0		0		0		0		0		0	
35 - 39	0		33		18		9		4		0		0		0		0		0	
40 - 44	0		28		25		21		11		7		0		0		0		0	
45 - 49	0		32		24		29		15		18		1		0		0		0	
50 - 54	0		33		26		20		7		15		8		2		0		0	
55 - 59	0		12		20		25		11		9		10		6		2		0	
60 - 64	0		17		13		17		10		11		4		6		2		0	
65 - 69	0		9		11		13		4		3		5		3		4		0	
70 & Over	0		4		2		5		2		3		4		3		3		0	

Plan Name: Florida Crystals Corporation Pension Plan
EIN / PN: 65-0773338 / 001
Plan Sponsor: Florida Crystals Corporation
Valuation Date: April 1, 2009

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 25
Change in Method

The following changes in methods were made as part of this valuation:

- The discount rate was changed from the April 3-segment rates to the March 2009 full yield curve. This change is being made as elected by the plan sponsor and is deemed to be automatically approved by the IRS pursuant to guidance in the IRS March 31, 2009 Newsletter.

- Based upon an election by the plan sponsor, the asset valuation method changed from the market value of assets to the method described in IRS Notice 2009-22 which reflects changes made by the WRERA. Changes in the asset method for plan years beginning in 2009 to any permissible asset method are deemed to be automatically approved by the IRS.

- The valuation software used to produce the actuarial information submitted on this schedule has been refined to reflect evolving understanding of PPA requirements, and such modifications may be considered to be a method change. The percentage changes in funding target, target normal cost and plan assets due to the refinements in the software are each less than 2% (disregarding the effects of any changes that are automatically approved under final IRC 430 regulations), and the modifications to the software were designed to produce results no less accurate than the results produced by the software prior to the change. Therefore the change in funding method due to a change in valuation software receives automatic approval under IRS Announcement 2010-3.

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ Complete all entries in accordance with the instructions to the Form 5500.

OMB Nos. 1210 - 0110
1210 - 0089

2009

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 04/01/2009 and ending 03/31/2010

A This return/report is for: ☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) _____

B This return/report is: ☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here ▶ ☐

D Check box if filing under: ☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II Basic Plan Information - enter all requested information

1a Name of plan
FLORIDA CRYSTALS CORPORATION PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 04/01/1974

2a Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
FLORIDA CRYSTALS CORPORATION

P.O. BOX 3435

WEST PALM BEACH FL 33401
ONE N. CLEMATIS ST., STE 200

WEST PALM BEACH FL 33401

2b Employer Identification Number (EIN) 65-0773338

2c Sponsor's telephone number 561-655-6303

2d Business code (see instructions) 311300

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Signature of plan administrator	Date: 1/12/11	Enter name of individual signing as plan administrator: ERIK J. BLOMQVIST
SIGN HERE	Signature of employer/plan sponsor: VP	Date: 1/12/11	Enter name of individual signing as employer or plan sponsor: ERIK J. BLOMQVIST
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2009)
V.092307.1

3a Plan administrator's name and address (If same as plan sponsor, enter "Same")	3b Administrator's EIN
SAME	3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	4b EIN
a Sponsor's name	4c PN

5 Total number of participants at the beginning of the plan year	5	1353
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		
a Active participants	6a	769
b Retired or separated participants receiving benefits	6b	223
c Other retired or separated participants entitled to future benefits	6c	252
d Subtotal. Add lines 6a, 6b, and 6c	6d	1244
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	52
f Total. Add lines 6d and 6e	6f	1296
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	2
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1A 1G

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) [ ] Insurance	(1) [ ] Insurance
(2) [ ] Code section 412(e)(3) insurance contracts	(2) [ ] Code section 412(e)(3) insurance contracts
(3) [X] Trust	(3) [X] Trust
(4) [ ] General assets of the sponsor	(4) [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) [X] **R** (Retirement Plan Information)
- (2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) [X] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) [X] **H** (Financial Information)
- (2) [ ] **I** (Financial Information - Small Plan)
- (3) [ ] ____ **A** (Insurance Information)
- (4) [ ] **C** (Service Provider Information)
- (5) [ ] **D** (DFE/Participating Plan Information)
- (6) [ ] **G** (Financial Transaction Schedules)

FLORIDA CRYSTALS CORPORATION
PENSION PLAN

Schedule H, Line 4j – Schedule of Reportable Transactions

Year ended March 31, 2010

E.I.N. #65-0773338

Description	Purchase Price	Sales Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Short-term investments:					
*Evergreen Treasury Money Market Fund	$ 14,034,506	–	–	14,034,506	–
*Evergreen Treasury Money Market Fund	–	15,839,584	15,839,584	15,839,584	–

*Denotes a party-in-interest transaction with Wells Fargo Bank, N.A.

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 04/01/2009 and ending 03/31/2010

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan

Florida Crystals Corporation Pension Plan

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF

Florida Crystals Corporation

D Employer Identification Number (EIN)

65-0773338

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 4 Day 1 Year 2009

2	Assets:			
	a Market value		**2a**	42,138,016
	b Actuarial value		**2b**	46,351,818
3	Funding target/participant count breakdown		**(1)** Number of participants	**(2)** Funding Target
	a For retired participants and beneficiaries receiving payment	**3a**	268	15,334,585
	b For terminated vested participants	**3b**	341	5,298,308
	c For active participants:			
	(1) Non-vested benefits	**3c(1)**		4,272,692
	(2) Vested benefits	**3c(2)**		18,716,918
	(3) Total active	**3c(3)**	744	22,989,610
	d Total	**3d**	1,353	43,622,503
4	If the plan is at-risk, check the box and complete items (a) and (b) [ ]			
	a Funding target disregarding prescribed at-risk assumptions		**4a**	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor		**4b**	
5	Effective interest rate		**5**	7.52 %
6	Target normal cost		**6**	1,956,339

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE Helen Netherton

Signature of actuary

11/29/2010

Date

Helen Netherton

Type or print name of actuary

08-04078

Most recent enrollment number

Towers Watson Delaware Inc.

Firm name

(786)552-1100

Telephone number (including area code)

255 Alhambra Circle, Suite 950

Coral Gables FL 33134

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	6,049,877	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	2,075,934	0
9	Amount remaining (Item 7 minus item 8)	3,973,943	0
10	Interest on item 9 using prior year's actual return of (17.93)%	(712,449)	
11	Prior year's excess contributions to be added to prefunding balance:		
	a Excess contributions (Item 38 from prior year)		0
	b Interest on (a) using prior year's effective rate of 6.20 %		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Reduction in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d - item 12)	3,261,494	0

Part III Funding percentages

14	Funding target attainment percentage	14	98.78 %
15	Adjusted funding target attainment percentage	15	106.25 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	112.81 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
02/22/2010	3,500,000				
			Totals ► 18(b)	3,500,000	18(c) 0

19	Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contribution from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3,280,851

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:

	1st segment: %	2nd segment: %	3rd segment: %	
a Segment rates:				[X] N/A, full yield curve used

b Applicable month (enter code)	**21b**	1
22 Weighted average retirement age	**22**	67

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] Prescribed - separate [ ] Substitute

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	[ ] Yes	[X] No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	[X] Yes	[ ] No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	[X] Yes	[ ] No

27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)	**30**	0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)	**31**	1,956,339

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33)	**34**	1,956,339

	Carryover balance	Prefunding balance	Total balance
35 Balances used to offset funding requirement	0	0	0

36 Additional cash requirement (item 34 minus item 35)	**36**	1,956,339
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c)	**37**	3,280,851
38 Interest-adjusted excess contributions for current year (see instructions)	**38**	1,324,512
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)	**39**	0
40 Unpaid minimum required contribution for all years	**40**	0

SCHEDULE SB ATTACHMENTS

Statement by Enrolled Actuary

Plan Sponsor	Florida Crystals Corporation
EIN/PN	65-0773338 / 001
Plan Name	Florida Crystals Corporation Pension Plan
Valuation Date	April 1, 2009
Enrolled Actuary	Helen Netherton
Enrollment Number	08-04078

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of April 1, 2009

The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

x	q_x^r	l_x	$_{x-55}p_{55} = l_x / l_{55}$	$q_x^r * l_x / l_{55}$	$x * q_x * l_x / l_{55}$
65	0.2500	1,000,000	1.000000	0.250000	16.250000
66	0.2500	750,000	0.750000	0.187500	12.375000
67	0.2500	562,500	0.562500	0.140625	9.421875
68	0.2500	421,875	0.421875	0.105469	7.171875
69	0.2500	316,406	0.316406	0.079102	5.458008
70	1.0000	237,305	0.237305	0.237305	16.611328

Average Age at Retirement 67.288086

Rounded for Schedule SB Line 22 67

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions / Methods

Discount Rates

Current plan year PPA effective interest rate is 7.52% based on March 2009 Full Yield Curve.

Prior plan year PPA effective interest rate is 6.20% based on the 3-Segment Rates for April 2008.

Transition election: None

Assumed Cost of Living Adjustments

Not applicable.

Inclusion Date

The valuation date coincident with or next following the date on which the employee becomes a participant.

Plan-related Expenses

The amount included this year for plan-related expenses is $0.

Mortality

For all participants: The prescribed mortality assumption under Section 430(h)(3)(A) of the Internal Revenue Code using static tables with separate mortality rates for annuitants and non-annuitants.

SCHEDULE SB ATTACHMENTS (cont.)

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants are assumed to retire by age are shown below:

Percentage retiring during the year	
Attained Age	**% Retiring**
65	25%
66	25%
67	25%
68	25%
69	25%
70	100%

Disability Rates

Sample rates at which participants are assumed to become disabled by age and gender are shown below:

Percentage becoming disabled during the year	
Age	**Males & Females**
20	0.060%
25	0.094%
30	0.147%
35	0.219%
40	0.329%
45	0.511%
50	0.838%
55	1.498%
60	2.107%

SCHEDULE SB ATTACHMENTS (cont.)

Compensation Increases

For purposes of determining the normal cost and the maximum deductible contribution, compensation is assumed to increase by 4.00% per annum.

Future Increases in Social Security

Not applicable.

Future Increases in Maximum Benefits and Plan Compensation Limitations

Accrued benefits projected to be paid in future years are limited to the maximum presently allowed under IRC §415. Plan compensation is limited to the maximum presently allowed under IRC §401(a)(17). No provision is made for future increases in the maximum annual benefit or compensation limit.

Representative Termination Rates (not due to disability, retirement or mortality)

Sample rates at which participants are assumed to leave the company by years of service are shown below:

Percentage leaving during the year	
Age	**Ultimate Rate**
20	25%
25	20%
30	15%
35	10%
40	8%
45	6%
50	5%
55	5%
60 and over	0%

These ultimate rates are for participants with 3 or more years of vesting service. If vesting service is less than 3 years, then multiply the applicable ultimate rates shown above by 1.5.

For example, a participant who is age 30 with 2 years of vesting service in a particular year would have a termination rate of 22.5% (15% x 1.5).

Form of Payment

Participants are assumed to elect the normal form, which is a single life annuity.

SCHEDULE SB ATTACHMENTS (cont.)

Marriage

For purposes of valuing the pre-retirement surviving spouse's benefit, 80% of eligible participants are assumed to be married, and male spouses are assumed to be three (3) years older than female spouses.

Employees

It was assumed there will be no new or rehired employees.

Valuation Compensation

Compensation assumed on the valuation date is the prior year's compensation increased by half-year's assumed compensation increase.

Asset Method: Average Value

Under this method, the valuation assets are equal to the average of three values (all determined without regard to receivable contributions), the result increased by the discounted present value of contributions expected to be made after the valuation date based on the prior plan year PPA effective interest rate. This amount is then subject to a 10% corridor around the market value of assets (including the discounted present value of receivable contributions) as of the valuation date. The three values used to develop the average value are: the market value of assets as of the current valuation date, the adjusted market value of assets as of the prior valuation date and the adjusted market value of assets as of the second prior valuation date. The adjusted market value as of a relevant valuation date is equal to the market value of assets as of the prior valuation date increased by actual plan contributions and assumed return on plan assets and decreased by actual plan disbursements after that date until the current valuation date.

The assumed rate of return on plan assets for the prior plan year (pursuant to IRS Notice 2009-22) was 6.52%, which is the lesser of the anticipated rate of return on assets for the plan year, equal to 7.75%, and the applicable limitation for the plan year, equal to 6.52%. The assumed rate of return on plan assets for the second prior plan year (pursuant to IRS Notice 2009-22) was 6.19%, which is the lesser of the anticipated rate of return on assets for the plan year, equal to 7.75%, and the applicable limitation for the plan year, equal to 6.19%. The algebraically equivalent development of this method (pursuant to IRS Notice 2009-22) is shown in Section 2.4.

Participant Data

Employee data as of the valuation date and data for other participants were supplied electronically by Florida Crystals Corporation.

SCHEDULE SB ATTACHMENTS (cont.)

Tax Policy

The actuarial valuation performed for the plan year ending March 31, 2010 is used to determine the maximum deductible contribution for the tax year ending March 31, 2010.

Benefits not Included in Valuation

We believe that we have reflected all significant plan provisions in this valuation.

PBGC Premium Funding Target

For purposes of determining the PBGC Premium Funding Target in Section 2.2.D, the Standard Premium Funding Target was determined using the assumptions described above, except the three-segment interest rates for March 2009 were used instead of the above interest assumption.

Nature of Actuarial Calculations

The results documented in this report are estimates based on data that may be imperfect and on assumptions about future events. Certain plan provisions may be approximated or deemed insignificant and therefore are not valued. Assumptions may be made about participant data or other factors. Reasonable efforts were made in this valuation to ensure that items that are significant in the context of the actuarial liabilities or costs are treated appropriately, and not excluded or included inappropriately.

A range of results, different from those presented in this report could be considered reasonable. The numbers are not rounded, but this is for convenience only and should not imply precision, which is not inherent in actuarial calculations. The Funding Target Attainment Percentage as of April 1, 2009 is truncated to the nearest .01% to be consistent with the rounding specified for Schedule SB of the Form 5500.

The assumptions selected for this valuation other than those prescribed by law, generally reflect long-term average expectations. If overall future plan experience is less favorable than assumed, the relative level of plan costs or contribution requirements determined in this valuation will likely increase in future valuations. Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for the measurements (such as the end of an amortization period); and changes in plan provisions or applicable law. It is beyond the scope of this actuarial valuation to analyze the potential range of future pension contributions, but we can do so upon request.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Summary of Plan Provisions

Effective Date and Most Recent Amendment

Established April 1, 1974; most recent restatement effective April 1, 2008.

Plan Year

The twelve-month period ending March 31st.

Coverage and Participation

Status:	Eligible employee (generally all employees except bargaining unit)
Age:	Attained age 21
Service:	One year of service equal to 1,000 hours of service
Entry Date:	April 1st or October 1st after meeting above requirements

Credited Service

One year of Credited Service is earned for each calendar year in which an eligible employee earns 1,000 or more hours of service. No Credited Service is granted prior to age 21.

Vesting Service

One year of Vesting Service is earned for each calendar year in which an employee earns 1,000 or more hours of service.

Compensation

Annual compensation is the regular salary and wages, bonuses (except special bonuses), overtime pay and commissions paid by the employer to an employee during a calendar year. Compensation includes deferrals to the employer's 401(k) plan and contributions in accordance with Sections 125 and 132(f)(4) of the IRC. IRC 401(a)(17) limits apply.

SCHEDULE SB ATTACHMENTS (cont.)

Average Compensation

The average of a participant's annual compensation for the five consecutive complete calendar years out of the ten most recent that produce the highest average, where compensation reflects IRS limits on includable compensation.

Normal Retirement Benefit

Eligibility: Attained age 65 with five years of participation.

Form: Monthly life annuity (automatic form for married participants is actuarially equivalent joint and 50% survivor annuity - optional forms may be elected prior to retirement).

Annual Benefit: The sum of (a) and (b), multiplied by (c), (min. $600):

(a) 0.7% of Average Compensation up to $18,600

(b) 1.1% of Average Compensation above $18,600

(c) Credited Service up to a maximum of 30 years

The benefit for a participant shall not be less than his accrued benefit under the Okeelanta Retirement Plan as of March 31, 1991.

Participants who were active members of the Okeelanta Retirement Plan as of March 31, 1991 and were at least age 45 and had 15 or more years of service at that time, are entitled to their Okeelanta Retirement Plan benefit as of March 31, 1991, plus a special benefit calculated as .009 x Average Compensation x Years of Service (1991 and later), if such total amount would be greater than the benefit earned under the regular formula.

Late Retirement Benefit

Eligibility: Retirement after Normal Retirement Date.

Form: Same as Normal Retirement Benefit.

Benefit: Accrued Benefit at Late Retirement Date. (Actuarial increase after age 70 ½)

SCHEDULE SB ATTACHMENTS (cont.)

Early Retirement Benefit

Eligibility: Attained age 55 and completed 10 years of Vesting Service.

Form: Same as Normal Retirement Benefit.

Benefit: Accrued Benefit on Early Retirement Date multiplied by the factor below corresponding to the number of years Early Retirement Date precedes Normal Retirement Date:

Years	Factor
1	95%
2	90%
3	85%
4	80%
5	75%
6	70%
7	65%
8	60%
9	55%
10	50%

Deferred Vested Benefit

Eligibility: Termination of employment and Vesting Percentage of 100%.

Vesting Percentage: 100% after five years of Vesting Service - For less than five years, the Vesting Percentage is 0%.

Form: Same as Normal Retirement Benefit with benefit deferred until Normal Retirement Date.

Benefit: Accrued Benefit on date of termination multiplied by the Vesting Percentage.

Survivor Annuity Death Benefit

Eligibility: Qualified married participant vested in an accrued benefit.

Form: Monthly annuity payable to spouse, deferred to participant's earliest retirement date if later than the date of death.

Benefit: Surviving spouse receives a pension for life beginning at the time the participant would have been eligible to retire, determined under the joint and 100% survivor annuity form of payment.

SCHEDULE SB ATTACHMENTS (cont.)

Disability Retirement Benefit

Eligibility: Employee participant disabled in accordance with the Company's long term disability plan after becoming 100% vested under the pension plan.

Benefit: Commencing on the participant's retirement date if he is then living and still disabled, a retirement benefit calculated assuming that Credited Service and earnings (at rate of pay on January 1st of year of disability) continued to retirement.

Normal Form of Payment

Single life annuity. If participant is married, an actuarially adjusted joint and 50% contingent benefit with the spouse is payable unless an optional form of payment is elected.

Optional Form of Payment in Lieu of Normal Form

- 10 year Certain and Life Annuity
- Joint and 50% Survivor Annuity
- Joint and 75% Survivor Annuity
- Joint and 100% Survivor Annuity
- Lump Sum ($25,000 or less)

Changes in Plan Provisions since Last Actuarial Valuation

None.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 25
Change in Method

The following changes in methods were made as part of this valuation:

- The discount rate was changed from the April 3-segment rates to the March 2009 full yield curve. This change is being made as elected by the plan sponsor and is deemed to be automatically approved by the IRS pursuant to guidance in the IRS March 31, 2009 Newsletter.

- Based upon an election by the plan sponsor, the asset valuation method changed from the market value of assets to the method described in IRS Notice 2009-22 which reflects changes made by the WRERA. Changes in the asset method for plan years beginning in 2009 to any permissible asset method are deemed to be automatically approved by the IRS.

- The valuation software used to produce the actuarial information submitted on this schedule has been refined to reflect evolving understanding of PPA requirements, and such modifications may be considered to be a method change. The percentage changes in funding target, target normal cost and plan assets due to the refinements in the software are each less than 2% (disregarding the effects of any changes that are automatically approved under final IRC 430 regulations), and the modifications to the software were designed to produce results no less accurate than the results produced by the software prior to the change. Therefore the change in funding method due to a change in valuation software receives automatic approval under IRS Announcement 2010-3.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26
Schedule of Active Participant Data as of April 1, 2009

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		20		1		0		0		0		0		0		0		0	
25 - 29	0		40		9		0		0		0		0		0		0		0	
30 - 34	0		20		11		4		0		0		0		0		0		0	
35 - 39	0		33		18		9		4		0		0		0		0		0	
40 - 44	0		28		25		21		11		7		0		0		0		0	
45 - 49	0		32		24		29		15		18		1		0		0		0	
50 - 54	0		33		26		20		7		15		8		2		0		0	
55 - 59	0		12		20		25		11		9		10		6		2		0	
60 - 64	0		17		13		17		10		11		4		6		2		0	
65 - 69	0		9		11		13		4		3		5		3		4		0	
70 & Over	0		4		2		5		2		3		4		3		3		0	

Plan Name: Florida Crystals Corporation Pension Plan
EIN / PN: 65-0773338 / 001
Plan Sponsor: Florida Crystals Corporation
Valuation Date: April 1, 2009