

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 710027

**Entity Name:** CENTRAL FLORIDA CHEMICAL WORKERS BUILDING CORPORATION, INC.,**Current Principal Place of Business:**118 1ST AVE. N.W.  
MULBERRY, FL 33860**Current Mailing Address:**PO BOX 428  
MULBERRY, FL 33860 US**FEI Number: 59-1028719****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOLTON, TONEY L  
3915 CHART PRINE RD  
LAKELAND , FL 33809 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** TONEY L HOLTON

04/03/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP, 2  
Name CASSELL, LYLE  
Address 2417 AVE A N.W.  
City-State-Zip: WINTER HAVEN FL 33880

Title VP1  
Name KISTLER, RICHARD  
Address 5029 MISTY LAKE DR  
City-State-Zip: MULBERRY FL 33860

Title RECORDER  
Name EASON, PAT  
Address 3452 CHRISTINA GROVES CT S  
City-State-Zip: LAKELAND FL 33813

Title VP 3  
Name MCBRIDE, BILL  
Address 2419 AVE A N.W.  
City-State-Zip: WINTER HAVEN FL 33880

Title SECRETARY/TREASURER  
Name BROWN, MILTON ANTHONY  
Address 5780 DAUGHTRY DOWNS LOOP  
City-State-Zip: LAKELAND FL 33809

Title PRESIDENT  
Name HOLTON, TONEY L  
Address 3915 CHART PRINE RD  
City-State-Zip: LAKELAND FL 33809

Title ASSISTANT  
SECRETARY/TREASURER  
Name COCHRAN, RICHARD E  
Address 2680 BROOKE RD N  
City-State-Zip: FORT MEADE FL 33841

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RICHARD E COCHRANASSISTANT  
SECRETARY/TREASURER

04/03/2017

Electronic Signature of Signing Officer/Director Detail

Date