

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G09925

**FILED**  
**Feb 28, 2014**  
**Secretary of State**  
**CC9156635948**

**Entity Name:** ACME SPONGE & CHAMOIS CO., INC.

**Current Principal Place of Business:**

855 E. PINE STREET  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

P.O. BOX 339  
TARPON SPRINGS, FL 34688-0339

**FEI Number: 36-2097597**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CANTONIS, JAMES M  
855 E PINE ST  
TARPON SPRINGS, FL 34689 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name CANTONIS, JAMES M  
Address 855 E PINE ST  
City-State-Zip: TARPON SPRINGS FL

Title D/VP  
Name CANTONIS, GEORGE M,  
Address 855 E PINE ST  
City-State-Zip: TARPON SPRINGS FL

Title DST  
Name HELLER, STEPHEN H.  
Address 855 E PINE ST  
City-State-Zip: TARPON SPRINGS FL

Title D  
Name CANTONIS, MICHAEL G II  
Address 855 E PINE ST  
City-State-Zip: TARPON SPRINGS FL 34689

Title D, VP  
Name TROIO, NANCY  
Address 855 E. PINE STREET  
City-State-Zip: TARPON SPRINGS FL 34689

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL G CANTONIS II**

**D**

**02/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date