

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000665

Entity Name: PVS-NOLWOOD CHEMICALS, INC.**Current Principal Place of Business:**10900 HARPER AVENUE
DETROIT, MI 48213**Current Mailing Address:**10900 HARPER AVENUE
DETROIT, MI 48213**FEI Number: 38-2581221****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 CEO, DIRECTOR
Name NICHOLSON, TIMOTHY F.
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

Title VP
Name NICHOLSON, DAVID A
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

Title SECRETARY
Name TAUB, JONATHAN S
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

Title TREASURER
Name BULATOVIC, MILISAV M
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

Title ASST. SECRETARY
Name DEVLEESCHOUWER, JAMES B
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

Title VP OF SALES & MARKETING
Name TEMPLE, TRACY
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

Title PRESIDENT
Name FITZGERALD, ROBERT E.
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

Title ASSISTANT SECRETARY
Name TAUB, JESSICA A.
Address 10900 HARPER AVENUE
City-State-Zip: DETROIT MI 48213

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: JONATHAN S. TAUB**SECRETARY****01/23/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date