

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 143473

FILED
Jan 13, 2004
Secretary of State

Entity Name: FLORIDA CHEMICAL COMPANY, INC.

Current Principal Place of Business:

351 WINTERHAVEN BLVD NE
WINTER HAVEN, FL 33881 US

New Principal Place of Business:

Current Mailing Address:

351 WINTERHAVEN BLVD NE
WINTER HAVEN, FL 33881 US

New Mailing Address:

FEI Number: 59-0530833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULZ, PAUL
351 WINTER HAVEN BLVD NE
WINTER HAVEN FL., FL 33881 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: HARDY, CARLA S
Address: 918 ALBA DR
City-St-Zip: ORLANDO, FL 32804

Title: V () Delete
Name: SCHULZ, LAURA
Address: 4 MOUNT VERON PLACE
City-St-Zip: ASHEVILLE, NC 28804

Title: PD () Delete
Name: SCHULZ, PAUL W.,
Address: 351 WINTER HANE SBLVD NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: ST () Delete
Name: SCHULZ, CAROLE A
Address: 351 WINTER HAVEN BLVD NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD () Delete
Name: SNIVELY, JOSHUA A
Address: 351 WINTER HAVEN BLVD., NE
City-St-Zip: WINTER HAVEN, FL 338819432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSHUA SNIVELY

SD

01/13/2004

Electronic Signature of Signing Officer or Director

Date