PROFIT CORPORATION ANNUAL REPORT <b>1996</b>			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			۴	
1. Corporation	MENT # Name DBURY CHEMIC	242045 CAL COMPANY	(3)		t ADRIA HER DIANT IDA DAVA		
Principal Place ( 13690 SW 2 P.O. BOX 4 PRINCETON	248TH ST 319	M	ailing Address 13690 SW 248TH ST P.O. BOX 4319 PRINCETON FL 3303	2	3. Date Incorporated or Qualified 11/01/1960	3a. Date of La	
2. Phinopal Pla 1	ce of Busineus	2a 26	Mailing Address		4. FEI Number 59-09 10250		Applied For Not Applicable
∫ Suite, Apt #	, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		.75 Additional
?] — City & Stafe 		27	City & State		6. Election Campaign Financing Trust Fund Contribution	<del>د</del> ا دا	ee Required 5.00 May Be
3  Zip 	Cour	ntry	Zip	Country	8. This corporation has liability for	A	dded to Fees er s. 199.032,
4	25 9. Name and Add	29 Iress of Current Regis	stered Agent	81 Name	10. Name and Address of New I		
13690	t.Jlee , Jr. Sw 248th Stree Eton Fl 33030	π		82 Street Ad 83 84 City	ddress (P.O. Box Number is Not Accepta	FI 85	Zip Code
or registere farmiar with SGNATURE	kd agent, or both, in ti b, and accept the ob⊧	chors 607.0502 and 60 he State of Florida Sucj galions of, Section 607 http://galionala.org/ configurationala.org/ configurationala.org/ CONFIGERS AND DIREC	h change was authorize .0505, Florida Statutes. andralie	s, the above-named corp ad by the corporation's b It. Registered Agent signature req 13. 1 1 HILE	poration submits this statement for the pu ward of directors. I hereby accept the app sured when reinstating) ADDITIONS/CHANGES TO OFF	DATE	ered agent. I am CTORS IN 12
AM: JEFFTADOBESS	SMITH,T.JLEE 13690 SW 24	BTH ST		1.2 NAME 1.3 STREET ADORESS			CTORS IN 12
DTY-SL-ZPP UT.E	PRINCETON F	ΈL		1.4 CITY - ST - ZIP 2-1 TITLE		Char	
AME THEF CADDRESS	LEE, LLOYD J 13690 SW 24 PRINCETON,	BTH ST		2 2 NAME 2 3 STREET ADDRESS			
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ey ist zip itte me meetadoress its-st zie	D MARSH, TERF 13690 SW 24 PRINCETON F	7Y D. 8 St.	C) DELETE	3 4 CHY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 A CTX-ST-ZIP		🔲 Char	nge 🗌 Addition
nde anderss Ame Trefi angerss Tylistizie			DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		[1] Char	nge 🗋 Addilion
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certify that oath, that I	the information indica am an officer or direc Block 12 or Block 13	ited on this annual repo stor of the corporation c til changed, or on an at	rt or supplemental annu ir the receiver or trustee	al report is true and acc empowered to execute ess.	ify for the exemption stated in Section 119 surate and that my signature shall have the this report as required by Chapter 607, F	e same legal effect lorida Statutes; and	as if made under d that my name