## 2008 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Apr 09, 2008 08:00 A Secretary of State **DOCUMENT #278545** 1. Entity Name LEE CHEMICAL CORPORATION Principal Place of Business Mailing Address 2800 TAFT AVE 2800 TAFT AVE ORLANDO, FL 32804 ORLANDO, FL 32804 No Cha-P CR2E034 (11/05) 01102008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-1035414 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HACKLEY, ROBLEY H II DO NOT WRITE **823 CHESTNUT STREET** CLERMONT, FL 34711 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ΡD TITLE HACKLEY II, ROBLEY H NAME **823 CHESTNUT ST** STREET ADDRESS CITY-ST-ZIP CLERMONT, FL 34711 TITLE VD NAME HACKLEY II, ROBLEY H STREET ADDRESS 823 CHESTNUT ST CITY-ST-ZIP CLERMONT, FL 34711 TITLE ST HACKLEY II, ROBLEY H NAME STREET ADDRESS 823 CHESTNUT ST DO NOT WRITE CITY-ST-ZIP CLERMONT, FL 34711 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. It hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP