

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 405988

Entity Name: CHEM-QUIP, INC.

FILED
Apr 15, 2005
Secretary of State

Current Principal Place of Business:

5675 NEW TAMPA HWY
#4
LAKELAND, FL 33815 US

New Principal Place of Business:

Current Mailing Address:

5675 NEW TAMPA HWY
#4
LAKELAND, FL 33815 US

New Mailing Address:

FEI Number: 59-1400932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONNICHSEN, BARRY M.
5675 NEW TAMPA HWY. #4
LAKELAND, FL 33815 US

Name and Address of New Registered Agent:

BONNICHSEN, BARRY M P
5675 NEW TAMPA HWY.
#4
LAKELAND, FL 33815 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: BARRY M. BONNICHSEN 04/15/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: BONNICHSEN, BARRY M,
Address: 3625 NEW JERSEY ROAD, #147
City-St-Zip: LAKELAND, FL 33803

Title: VDS () Delete
Name: BONNICHSEN, GAIL L
Address: 3625 NEW JERSEY ROAD, #147
City-St-Zip: LAKELAND, FL

Title: D () Delete
Name: BONNICHSEN, DAVID
Address: 9010 ROCK LEDGE COURT, #4C401
City-St-Zip: OWINGS MILL, MD 21117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: BONNICHSEN, DAVID
Address: 632 REGESTER AVENUE
City-St-Zip: BALTIMORE, MD 21212

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: BARRY M. BONNICHSEN P 04/15/2005
Electronic Signature of Signing Officer or Director Date