


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # F00000002428
 1. Entity Name
 CHEMCORE, INC.



Principal Place of Business: 9940 CURRIE DAVIS DR SUITE C TAMPA, FL 33619
 Mailing Address: PO BOX 3139 DAYTON, OH 45401-3139



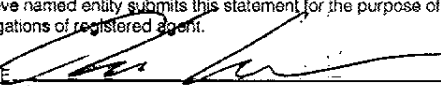
01192004 No Chg-P CR2E034 (10/03)

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4. FEI Number: 31-1699573 Applied For: Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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:  DATE: 4/20/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000128561
 04/26/04-80043-014 150.00

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	CHASE, LORENZ A
STREET ADDRESS	3209 ATHERTON RD
CITY - ST - ZIP	KETTERING, OH 45409
TITLE	T
NAME	BORCHERS, THOMAS E
STREET ADDRESS	501 E THIRD STREET
CITY - ST - ZIP	DAYTON, OH 45402
TITLE	PCD
NAME	LORENZ, GEOFFREY R
STREET ADDRESS	4521 SOUTHERN BLVD
CITY - ST - ZIP	KETTERING, OH 45429
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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

SIGNATURE:  DATE: 4/20/04 DAYTIME PHONE #: 534-0410
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR