FILED
Apr 03, 2003 8:00 am
Secretary of State
04-03-2003 90122 025 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000002624

1. Entity Name
ARCADIA CHEMICAL INDUSTRIES, INC.

90070176

Principal Place of Business
~~PO BOX 1050~~
~~OSPREY, FL 34229-1050~~

Mailing Address
~~PO BOX 1050~~
~~OSPREY, FL 34229-1050~~

2. Principal Place of Business
15444 FIDDLESTICKS BLVD
Suite, Apt. #, etc.
City & State: FT MYERS
Zip: 33912
Country: LE

3. Mailing Address
15444 FIDDLESTICKS BLVD
Suite, Apt. #, etc.
City & State: FT MYERS
Zip: 33912
Country: LEE

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 16-1033476 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUMSDEN, DENNIS J
5551 RIDGEWOODDR., #405
NAPLES, FL 34108

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD LAWLOR, J. KEVIN ~~9558 FOREST HILL CIRCLE~~ ~~SARASOTA, FL~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LAWLOR J KEVIN 15444 FIDDLESTICKS BLVD FT MYERS, FL 33912 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LAWLOR, MARGARET M 9558 FOREST HILL CIRCLE SARASOTA, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LAWLOR MARGARET M 15444 FIDDLESTICKS BLVD FT MYERS, FL 33912 ☑ Change ☐ Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: ______
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #