

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F83238

FILED  
Jan 05, 2007  
Secretary of State

Entity Name: ASTOR CHEMICAL COMPANY

## Current Principal Place of Business:

1874 BRITT RD., N.W.  
STUART, FL 34994

## New Principal Place of Business:

## Current Mailing Address:

1874 BRITT RD., N.W.  
STUART, FL 34994

## New Mailing Address:

FEI Number: 59-2202024

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUTLAND, LEONARD JR  
10 CENTRAL PARKWAY  
SUITE 350  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: WALTON, THOMPSON R  
Address: 1874 BRITT RD., NW  
City-St-Zip: STUART, FL

Title: DVS ( ) Delete  
Name: WALTON, JOYCE G  
Address: 1874 BRITT RD NW  
City-St-Zip: STUART, FL

Title: DT ( ) Delete  
Name: HAMMERICH, BARBARA D  
Address: 40 SW RIVERWAY BLVD  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: HENDRICKS, MARILYN J  
Address: 1681 22ND STREET, N.E. LEILANI HTS.  
City-St-Zip: JENSEN BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: WALTON, THOMPSON R  
Address: 1874 BRITT RD., NW  
City-St-Zip: STUART, FL 34994

Title: DVS (X) Change ( ) Addition  
Name: WALTON, JOYCE G  
Address: 1874 BRITT RD NW  
City-St-Zip: STUART, FL 34994

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

Title: D (X) Change ( ) Addition  
Name: HENDRICKS, MARILYN J  
Address: 390 SOUTH RIVER DRIVE  
City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: T.R.WALTON

PRES

01/05/2007

Electronic Signature of Signing Officer or Director

Date