2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000003377

Entity Name: CHEMICAL SPECIALTIES, INC.

FILED May 02, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:	
	ODLAWN GRE TTE, NC 28217	EN, SUITE 250 7		ONE WOODLAWN GREEN, SUITE 350 CHARLOTTE, NC 28217	
Current M	lailing Addres	ss:	New Maili	New Mailing Address:	
P.O. BOX HARRISBI	1330 URG, NC 280	75 US			
FEI Number:	: 56-0751521	FEI Number Applied For()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
1200 SOU PLANTATI The above		ND ROAD I US	purpose of changing	ts registered office or registered agent, or both,	
in the State	e of Florida.				
SIGNATU					
	Electror	nic Signature of Registered A	gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	AINSCOUGH, S	WN GREEN, SUITE 250	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition AINSCOUGH, STEPHEN B ONE WOODLAWN GREEN, SUITE 350 CHARLOTTE, NC 28217	
Title: Name: Address: City-St-Zip:	D () SIEFI, GHASEN 100 OVERLOC PRINCETON, N	K CENTER	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVS () RIORDAN, THO 100 OVERLOC PRINCETON, N	K CENTER	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () MOYES, JONA PHARR MILL R HARRISBURG,	OAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () BARTOS, SYLV 5910 PHARR M HARRISBURG,	IILL ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PRESTON, ALA	WN GREEN, SUITE 250	Title: Name: Address: City-St-Zip:	V (X) Change () Addition PRESTON, ALAN ONE WOODLAWN GREEN, SUITE 350 CHARLOTTE, NC 28217	

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: JONATHAN MOYES DV 05/02/2005