2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001363

Entity Name: NATURCHEM, INC.

FILED Feb 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 270 BRUNER RD LEXINGTON, SC 29072 **Current Mailing Address: New Mailing Address:** 270 BRUNER RD LEXINGTON, SC 29072 FEI Number: 57-0851059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MACLAREN, JOHN 4134 HWY, 441 S LAKE CITY, FL 32025 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition KELLIS, ROM D III Name: Name: KELLIS, ROM D III 270 BRUNER ROAD 1130 SHULL ISLAND ROAD Address: Address: City-St-Zip: LEXINGTON, SC 29072 City-St-Zip: GILBERT, SC 29054 SVP Title: SVP Title: () Delete (X) Change () Addition Name: JOHNSON, KENNETH Name: JOHNSON, KENNETH 270 BRUNER ROAD 340 LEWIE ROAD Address: Address: LEXINGTON, SC 29072 City-St-Zip: City-St-Zip: GILBERT, SC 29054 Title: VΡ () Delete Title: () Change () Addition KELLIS, ROM D IV Name: Name: 460 LAUREL ROAD Address: Address: City-St-Zip: LEXINGTON, SC 29073 City-St-Zip: Title: S/TR () Delete Title: () Change () Addition HIPES, JACKIE D Name: Name: Address: 222 BRONLOW DRIVE Address: City-St-Zip: IRMO, SC 29063 City-St-Zip: Title: Title: () Delete (X) Change () Addition KELLIS, WAYNE C Name: KELLIS, WAYNE C Name: 2367 ROCKAWAY INDUSTRIAL BLVD. Address: 511 ALCOVY LAKES DRIVE Address: City-St-Zip: CONYERS, GA 30012 City-St-Zip: MONROE, GA 30655 Title: () Delete Title: () Change (X) Addition Name: Name: HOOK, BRYAN 400 SANDY POINT ROAD Address: Address: City-St-Zip: City-St-Zip: LEXINGTON, SC 29072

I hereby certify that the information supplied with this filing does not qualify 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: JACKIE D. HIPES S/TR 02/20/2008