

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G89914

FILED
May 05, 2005
Secretary of State

Entity Name: CHEM POLYMER CORPORATION

Current Principal Place of Business:

2443 ROCKFILL ROAD
P O BOX 6927
FT. MYERS, FL 33916 US

New Principal Place of Business:

505 CENTRAL AVENUE
PAWTUCKET, RI 02861 US

Current Mailing Address:

2443 ROCKFILL ROAD
FT MYERS, FL 33916 US

New Mailing Address:

FEI Number: 59-2448189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, JOHN C
2443 ROCKFILL RD
FORT MYERS, FL 33916 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: VP () Delete
Name: LEE, JOHN,
Address: 2443 ROCKFILL RD
City-St-Zip: FT. MYERS, FL 33916

Title: P () Delete
Name: DEWULF, EVAN
Address: 2443 ROCKFILL RD
City-St-Zip: FT. MYERS, FL 339164822

Title: SD () Delete
Name: SANSOM, KEITH G
Address: 2443 ROCKFILL RD
City-St-Zip: FT. MYERS, FL 339164822

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FAIN, JONATHAN D
Address: 505 CENTRAL AVENUE
City-St-Zip: PAWTUCKET, RI 02861 US

Title: V (X) Change () Addition
Name: DEWULF, EVAN
Address: 2443 ROCKFILL RD
City-St-Zip: FT. MYERS, FL 339164822

Title: VD (X) Change () Addition
Name: LEDERER, BERTRAM M
Address: 505 CENTRAL AVENUE
City-St-Zip: PAWTUCKET, RI 02861 US

Title: S () Change (X) Addition
Name: MORRISON, JAMES E
Address: 505 CENTRAL AVENUE
City-St-Zip: PAWTUCKET, RI 02861 US

Title: D () Change (X) Addition
Name: MURRAY, WILLIAM J
Address: 505 CENTRAL AVENUE
City-St-Zip: PAWTUCKET, RI 02861 US

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: JAMES E. MORRISON

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05/05/2005

Electronic Signature of Signing Officer or Director

_____ Date