## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

appears in Block 12 or Block 13 it hanged or on an attachment with an address.

GNATURE:

SIGNATURE:

Jul 25 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # (9)MERIT CHEMICAL COMPANY Principal Place of Business Mailing Address 1532 KINGSLEY AVE. P.O. BOX 1685 SHITE 106 **ORANGE PARK FL 32067** ORANGE PARK FL 32067 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 09/19/1990 02/02/1996 2. Principal Place of Business 4, FEI Number 2a. Mailing Address Applied For 59-3030219 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Zio Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes □ No 25 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CHESTANG, BOBBY G. 1532 KINGSLEY AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **STE 105** 83 **ORANGE PARK FL 32073** City Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505. Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE CHESTANG, BOBBY GLEN NAME 1,2 NAME 2451 WHIPPOORWILL LANE STREET ADDRESS 1.3 STREET ADDRESS ORANGE PARK FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE CHESTAND, BRADLEY DEWIGHT NAME 2.2 NAME 2451 WHIPPOORWILL LANE STREET ADDRESS 2.3 STREET ADDRESS ORANGE PARK FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 1do 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 annual report or supplemental annual 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 79 904-264-6670

**FILED**