

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90117 022 ***150.00

DOCUMENT # S00754

1. Entity Name

MERIT CHEMICAL COMPANY

Principal Place of Business

**369 BLANDIWAY BLVD.
SUITE N-26
ORANGE PARK FL 32073
US**

Mailing Address

**P.O. BOX 1685
ORANGE PARK FL 32067
US**

2. Principal Place of Business

2451 Whipoorwill Ln

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

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DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3030219

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75

Additional Fee Required

6. Name and Address of Current Registered Agent

**CHESTANG, BOBBY G.
1532 KINGSLEY AVE.
STE 105
ORANGE PARK FL 32073**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Bobby G. Chestang

(NOTE: Registered Agent signature required when reinstating)

Jan 8, 2002

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	CHESTANG, BOBBY GLEN	
STREET ADDRESS	2451 WHIPPOORWILL LANE	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	V	☐ Delete
NAME	CHESTANG, BRADLEY DEWIGHT	
STREET ADDRESS	2451 WHIPPOORWILL LANE	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
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TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
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TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I 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 report or supplemental 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 appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bobby G. Chestang

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 8, 2002

DATE

904-610-7708

DAYTIME PHONE #

CR2E034 (9/01)