

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003487

Entity Name: PINE CHEMICALS ASSOCIATION, INC.**Current Principal Place of Business:**403 TARPON AVENUE UNIT 108
FERNANDINA BEACH, FL 32034**Current Mailing Address:**P.O. BOX 17136
FERNANDINA BEACH, FL 32035**FEI Number: 13-1887970****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**YOUNG, AMANDA
403 TARPON AVENUE UNIT 108
FERNANDINA BEACH, FL 32034 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

Officer/Director Detail :

Title DIRECTOR
Name GODINA, LEE
Address P.O. BOX 8149
City-State-Zip: STAMFORD CT 06905

Title D, VC
Name ADAMS, GREG
Address 2051 N. LANE AVE.
City-State-Zip: JACKSONVILLE FL 32254

Title D
Name KATAYAMA, MIKIO
Address 200 N. LASALLE STREET, SUITE 2600
City-State-Zip: CHICAGO IL 60601

Title DIRECTOR
Name MCLEAN, GREG
Address 4600 TOUCHTON ROAD EAST
SUITE 1200
City-State-Zip: JACKSONVILLE FL 32246

Title D
Name ACTON, PETER
Address 1101 W. LATHROP AVE., GATE 16
City-State-Zip: SAVANNAH GA 31415

Title SENIOR VP
Name MORRIS, CHARLES
Address 85316 AVANT ROAD
City-State-Zip: YULEE FL 32097

Title D
Name HOBSON, DALE
Address 601 CRESTWOOD STREET
City-State-Zip: JACKSONVILLE FL 32208

Title LEGAL COUNSEL
Name MACLEOD, ANTHONY
Address 500 WEST PUTNAM AVENUE
City-State-Zip: GREENWICH CT 06830

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMANDA YOUNG**EXECUTIVE DIRECTOR****03/09/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, CHAIRMAN
Name ROBERTS, MICHAEL
Address 133 PEACHTREE STREET NE, 19TH FLOOR
City-State-Zip: ATLANTA GA 30303

Title DIRECTOR
Name VIOLETTE, STEVEN
Address 3298 SUMMIT BLVD.
BUILDING 35
City-State-Zip: PENSACOLA FL 32503

Title DIRECTOR
Name HARRIS, HUNTER
Address 5255 VIRGINIA AVENUE
City-State-Zip: NORTH CHARLESTON SC 29406

Title DIRECTOR
Name CUNNINGHAM, ALEJANDRO
Address PROF. EDSON GALVAO, 68
City-State-Zip: ITAPETININGA SAO PAULO 18208-020

Title DIRECTOR
Name SCHNEIDER, COREY
Address 24 CATHEDRAL PLACE
SUITE 409
City-State-Zip: ST. AUGUSTINE FL 32084

Title DIRECTOR
Name KESELICA, DAVE
Address 4800 STATE ROAD 60 EAST
City-State-Zip: MULBERRY FL 33860-7905

Title EXECUTIVE DIRECTOR, OFFICER,
SECRETARY, TREASURER
Name YOUNG, AMANDA
Address P.O. BOX 17136
City-State-Zip: FERNANDINA BEACH FL 32035

Title DIRECTOR
Name GOODWIN, KEELY
Address PO BOX 431
City-State-Zip: KINGSPORT TN 37662