2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000003487

Entity Name: PINE CHEMICALS ASSOCIATION, INC.

Current Principal Place of Business:

97428 BLACKBEARDS WAY

YULEE, FL 32097

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 97428 BLACKBEARDS WAY YULEE, FL 32097 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

FILED Jan 30, 2015

Secretary of State

CC3296461904

Officer/Director Detail :

Title DIRECTOR Title D

GODINA, LEE ACTON, PETER Name Name

P.O. BOX 8149 1101 W. LATHROP AVE., GATE 16 Address Address

City-State-Zip: SAVANNAH GA 31415 STAMFORD CT 06905 City-State-Zip:

Title PRESIDENT, COO Title D Name MORRIS, CHARLES ADAMS, GREG Name

Address 85316 AVANT ROAD Address 2051 N. LANE AVE.

YULEE FL 32097 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32254

Title Title D

Name KENNEDY, KEN Name TRIESSCHEIJN. JEROEN

Address 2801 COOK STREET Address 200 N. LASALLE STREET, SUITE 2600

City-State-Zip: BRUNSWICK GA 31520

City-State-Zip: CHICAGO IL 60601

DIRECTOR Title Name MACLEOD, ANTHONY

Name MCLEAN, GREG 500 WEST PUTNAM AVENUE Address

Address 4600 TOUCHTON ROAD EAST City-State-Zip: GREENWICH CT 06830 **SUITE 1200**

City-State-Zip: JACKSONVILLE FL 32246

Continues on page 2

LEGAL COUNSEL

Title

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.

01/30/2015 SIGNATURE: AMANDA YOUNG EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR, VC

Name ROBERTS, MICHAEL

Address 133 PEACHTREE STREET NE, 19TH FLOOR

City-State-Zip: ATLANTA GA 30303

Title DIRECTOR, CHAIRMAN, CEO

Name VIOLETTE, STEVEN

3298 SUMMIT BLVD. BUILDING 35

City-State-Zip: PENSACOLA FL 32503

Title DIRECTOR

Address

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