

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **849343** (9)
1. Corporation Name
RIVERSIDE CHEMICAL COMPANY

Principal Place of Business 1013 CENTRE ROAD SUITE 350 WILMINGTON DE 19805 US	Mailing Address 1013 CENTRE ROAD SUITE 350 WILMINGTON DE 19805 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
**UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

11. Pursuant to the provisions of Sections 607.0402 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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	POT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POPEO, WILLIAM G	1.2 NAME	
STREET ADDRESS	1013 CENTRE RD., SUITE 350	1.3 STREET ADDRESS	
CITY-ST-ZIP	WILMINGTON DE 19805	1.4 CITY-ST-ZIP	
TITLE	VPS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DESCANO, NANCY E	2.2 NAME	
STREET ADDRESS	1013 CENTRE RD., SUITE 350	2.3 STREET ADDRESS	
CITY-ST-ZIP	WILMINGTON DE 19805	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTLER, DANIEL R	3.2 NAME	
STREET ADDRESS	1013 CENTRE RD., SUITE 350	3.3 STREET ADDRESS	
CITY-ST-ZIP	WILMINGTON DE 19805	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINN, BRUCE R	4.2 NAME	
STREET ADDRESS	1013 CENTRE RD., SUITE 350	4.3 STREET ADDRESS	
CITY-ST-ZIP	WILMINGTON DE 19805	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lisa G Mulligan	5.2 NAME	
STREET ADDRESS	1013 Centre Rd # 350	5.3 STREET ADDRESS	
CITY-ST-ZIP	Wilmington De 19805	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mary T. Flowers	6.2 NAME	
STREET ADDRESS	1013 Centre Rd # 350	6.3 STREET ADDRESS	
CITY-ST-ZIP	Wilmington De 19805	6.4 CITY-ST-ZIP	

14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary T. Flowers MARY T. FLOWERS 5/6/98



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/05/1981	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

CR2E034 (10/97)