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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

2428 LAKEWOOD RU DALTON GA 30721

DOCUMENT # F98000001333

1. Corporation Name

2428 LAKEWOOD RD

DALTON GA 30721

GEORGIA WOVEN PRODUCTS, INC.

 Principal Place of Business	Mailing Addre

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90254 007 ***150.00



DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualifed 03/09/1998			
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
3 2124		2a. Mailing Address 26 2124 S. Ho	amilto	n St.	58-2026386		t Applicable	
Suite, Apt.	·	Suite, Apt. #, etc.	-	• #-	5. Certifcate of Status Desired		Additional equired	
City & Stat	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip 307	120 25 USA	^{Zip} 30720 30	Country	SA	1 disental i seperty years	Yes	⊡No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	gent		
DALLAS, SHIRLEY 7222 ISLE CAPRI RD, SUITE 62 NAPLES FL 34114			81 82 83	Name Street Add	dress (P.O. Box Number is Not Acceptable)			
			84	City	FI	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes,	the above	named cor	poration submits this statement for the purpose of c	hanging its	registered	
office or r	registered agent, or both, in the State of am familiar with, and accept the obligation	i Florida. Such change was auth	orized by t	he corporat	ion's board of directors. I hereby accept the appoint	ment as re	gistered	
SIGNATURE	Signature, typed or printed name of registered agent a	and little if explicable. (NOTE: Re	cistored Acent	sionature requir	ed when reinstating) DATE			
12.	OFFICERS AND		13.	organica coquin	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12	
TITLE	P	□ DELETE	1.1 TITLE	ρ		Change	Addition	
NAME	SHAW, TRIPP		1.2 NAME	'7	ripp shaw ithe st			
STREET ADDRESS	ALCO LAVENICOD DD		1.3 STREET	ADDRESS 6	2124 S. Hamillon 31.			
CITY-ST-ZIP	DALTON GA 30721		1,4 CITY-ST-	.ZiP [Dalton, Ga. 30720			
TITLE	V	DELETE	2.1 TITLE	V	/	Change	Addition	
NAME .	WILLIAMS, RYAN D		2.2 NAME	B	ien Sasser_ #2			
STREET ADDRESS	6574 E. BRAINERO RD #707		2.3 STREET	ADDRESS 2	120 Holly Terrace #3			
CITY-ST-ZIP	CHATTANOOGA TN 37421		2. 4 CITY-ST	1 1	Dalton, Ga. 30720			
TITLE	S	☐ DELETE	3.1 TITLE			Change	☐ Addition	
NAME	SHEPHERD, ELAINE		3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP	DALTON GA 30721		3.4. CITY-ST	- ZIP				
TITLE	T	. DELETE	4.1 TITLE			Change	Addition	
NAME	ROSS, GABE		4 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP	CHATTANOOGA TN 37421		4.4 CITY-ST-	ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP			5.4 CITY-ST-	ZIP				
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-	- ZIP				

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 changes, or on an attachment with an appress, with all other like empowered.

SIGNATURE:

706-259-7673