

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Barbara B. Markham
Secretary of State
DIVISION OF CORPORATIONS

**FLORIDA
SECRETARY OF STATE
DIVISION OF CORPORATIONS**
95 MAR 30 AM 7:48

DOCUMENT # G57598 (6)
1. Corporation Name
RAINBOW WICKER & SILKS, INC.

Principal Place of Business Mailing Address
644 CYPRESS GARDENS BLVD 644 CYPRESS GARDENS BLVD
WINTER HAVEN FL 33880 WINTER HAVEN FL 33880

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
08/30/1983 03/29/1994

21. Principal Place of Business		26. Mailing Address		4. FEI Number		Applied For	
22. Suite, Apt. # etc.		27. Suite, Apt. #, etc.		59-2322603		Not Applicable	
23. City & State		28. City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip		29. Zip		30. Country		6. Election Campaign Financing Trust Fund Contribution	
						<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DIMLER, GERALD 644 CYPRESS GARDENS BLVD WINTER HAVEN FL 33880				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City			
				FL 85. Zip Code			

11. Pursuant to the provisions of Sections 607.0502 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 _____
Signature, typed or printed name of registered agent and the corporation (FACILE Registered Agent signature required when constituting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIMLER, GERALD	1.2 NAME	
STREET ADDRESS	644 CYPRESS GARDENS BLVD	1.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN, FL 00000	1.4 CITY - ST - ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DIMLER, MARY	2.2 NAME	
STREET ADDRESS	644 CYPRESS GARDENS BLVD	2.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER HAVEN, FL 00000	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 807, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Gerald E. Dimler* **Gerald Dimler** **3/24/95**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR