## 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

## DOCUMENT # J05018 1. Corporation Name

R & W DISTRIBUTORS, INC.

## FILED Jan 23, 1999 8:00am Secretary of State

01-23-1999 90022 018 \*\*\*150.00

Principal Place of Business Mailing Address							0 ( B) 1 B) E) 1   B B)
698 BELL ROAD 698 BELL ROAD SARASOTA FL 34240 SARASOTA FL 34240						DO NOT INDITE IN THIS DRACE	
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed 03/19/1986	
Principal Place of Business     2a. Mailing Address							plied For
21 26 26						"   <del>    ' '</del>	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75	
22 27						5. Certificate of Status Desired Fee Re	
City & State City & State						6. Election Campaign Financing \$5.00	May Be
23		28				Trust Fund Contribution Added	to Fees
Zip	Country Zip Co		Cou	ntry		8. This corporation owes the current year Intangible	m
24	25			_		Personal Property Tax. Yes	□No
	9. Name and Address of Cur	rent Registered Agent		81	Name	10. Name and Address of New Registered Agent	
SCH	OFIELD, P. ALLEN			"	Name		
1429 FLAMINGO BLVD.				82	82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 300				83			·····································
. BRADENTON FL 33507				55			
				84	City	FL 85 Zip (	Code
<ul> <li>office or r</li> </ul>	registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such change was a ligations of, Section 607.0505, Flo	uthorized rida Statu	l by i utes.	the corporation	oration submits this statement for the purpose of changing its n's board of directors. I hereby accept the appointment as re	gistered
12.	Signature, typed or printed name of registered	AND DIRECTORS	13.	Agent	t signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 12
TITLE	PD	DELETE	1.1 TII	ΠE		☐ Change	Addition
NAME	WEILER, NOAH		1.2 NAM				
STREET ADDRESS	55 TATUM RD		1.3 ST	REET	ADDRESS		
CITY-ST-ZIP	SARASOTA FL			TY-ST	-ZIP		
TITLE	VP	☐ DELETE	2.1 TIT	ΠE		Change	Addition
NAME	WEILER, RUTH		2.2 NA	ME			
STREET ADDRESS	55 TATUM RD		2.3 STREE		ADDRESS		
CITY-ST-ZIP	SARASOTA FL 2.		2. 4 Cf	TY-S1	T-ZIP		
TITLE SWITE	T,	DELETE 3.1		1E		☐ Change	☐ Addition
NAME	Acrem days		3.2 NA	ME			
STREET ADDRESS	55 TATUM RD		3.3 ST	REET	ADDRESS	• • • • • • • • • • • • • • • • • • • •	1 to
CITY-ST-ZIP	SARASOTA FL			TY-SI	T-ZIP		7 \$ 2 \$
TITLE	S SUTE	· ·		TLE .		↑ ☐ Change	☐ Addition
NAME 19 19 19	WEILER, RUTH		4. 2 N/				
STREET ADDRESS	I V				ADDRESS		
CITY-ST-ZIP TITLE	SARASOTA FL	☐ DELETE	4.4 CIT		-ZIP	Change	Addition
NAME			5.1 MA			Grange	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP	PC		5.4 CIT		i		
TITLE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DELETE 6.1				☐ Change	☐ Addition
NAME	A5 1,735		6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET.	ADDRESS		

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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE

WHI Z WILL SO RUTH DZ, Weiler 1/8/99 19

CR2E034 (11/98)