

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 28, 2008 08:00
Secretary of State**

DOCUMENT # P04000090688

1. Entity Name
RWCO, INC.



Principal Place of Business
**6045 SE US HIGHWAY 301
HAWTHORNE, FL 32640**

Mailing Address
**P O BOX 2310
HAWTHORNE, FL 32640**



04122008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1233888

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**RAMSEY, WILLIAM
6045 SE US HIGHWAY 301
HAWTHORNE, FL 32640**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RAMSEY, WILLIAM
STREET ADDRESS	6045 SE US HIGHWAY 301
CITY- ST- ZIP	HAWTHORNE, FL 32640
TITLE	SEC
NAME	WHITEHEAD, MICHAEL
STREET ADDRESS	6045 SE US HIGHWAY 301
CITY- ST- ZIP	HAWTHORNE, FL 32640
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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05/21/08-80051-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *W.P. Ramsey* **EA** 04-26-08 (352) 481-2305
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
W.P. RAMSEY, PRESIDENT