## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000157574

**FILED** Feb 19, 2006 Secretary of State

Entity Name: RWC SOLUTIONS, INC. **Current Principal Place of Business: New Principal Place of Business: 6 ROXANNE LANE** PALM COAST, FL 32164 **Current Mailing Address: New Mailing Address: 6 ROXANNE LANE** PALM COAST, FL 32164 FEI Number: 20-3867907 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CAFARELLI, CHARLES J 6 ROXANNÉ LANE PALM COAST, FL 32164 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition CAFARELLI, CHARLES J CAFARELLI, CHARLES J Name: Name: 6 ROXANNE LANE 6 ROXANNE LANE Address: Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32164

() Delete Title: ( ) Change (X) Addition

Title: CAFARELLI, VICTORIA A Name: Name: Address: Address: 6 ROXANNE LANE PALM COAST, FL 32164 City-St-Zip: Citv-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: CHARLES J CAFARELLI 02/19/2006