

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

FILED
Apr 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24217 (2)
1. Corporation Name
RUBBERMAID INCORPORATED



Principal Place of Business
1147 AKRON RD.,
WOOSTER OH 44691

Mailing Address
1147 AKRON RD.,
WOOSTER OH 44691-2501

3. Date Incorporated or Qualified 05/09/1989	3a. Date of Last Report 05/01/1996
4. FEI Number 34-0628700	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	SCHMITT WOLFGANG R	
STREET ADDRESS	1400 THE TREES	
CITY-ST-ZIP	WOOSTER OH	
TITLE	PCOO	<input type="checkbox"/> DELETE
NAME	CARROLL CHARLES A	
STREET ADDRESS	1545 EDEN	
CITY-ST-ZIP	WOOSTER OH	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	DEGNAN, MARTIN J	
STREET ADDRESS	1147 AKRON ROAD	
CITY-ST-ZIP	WOOSTER OH	
TITLE	SVPC	<input type="checkbox"/> DELETE
NAME	WEIGAND, GEORGE C	
STREET ADDRESS	1147 AKRON ROAD	
CITY-ST-ZIP	WOOSTER OH	
TITLE	SVP	<input type="checkbox"/> DELETE
NAME	GATES, RICHARD D.	
STREET ADDRESS	202 MILLER LAKE RD.	
CITY-ST-ZIP	WOOSTER OH	
TITLE	VPOC	<input type="checkbox"/> DELETE
NAME	MORGAN JAMES A	
STREET ADDRESS	350 CALDWELL DR	
CITY-ST-ZIP	WOOSTER OH	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 named, or on an attachment with an address.

SIGNATURE:

4/3/97 330-264-464

CR2E034 (9/96)