FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P26150 (3)

1. Corporation Name
RBP CHEMICAL CORPORATION

Principal Place of Business
150 SOUTH 118TH STREET
PO BOX 14069
MILWAUKEE WI 53214-0069
US

Mailing Address
150 SOUTH 118TH STREET
PO BOX 14069
MILWAUKEE WI 53214-0069
US

3. Date Incorporated or Qualified: 09/21/1989
3a. Date of Last Report: 05/01/1995
4. FEI Number: 39-0866582 — [ ] Applied For [ ] Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. [X] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 | Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 | Country 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
E1 Name
E2 Street Address (P.O. Box Number is Not Acceptable)
E3
E4 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.0502, 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 ______

12. OFFICERS AND DIRECTORS

TITLE	PD	[ ] DELETE
NAME	KANNENBERG, MARK E.	
STREET ADDRESS	6364 N. BERKELEY	
CITY-ST-ZIP	WHITEFISH BAY WI	
TITLE	STD	[ ] DELETE
NAME	WOODWARD, JAMES A.	
STREET ADDRESS	4003 PINE HILL BLVD.	
CITY-ST-ZIP	RACINE WI	
TITLE	D	[ ] DELETE
NAME	BEUTNER, GRANT C.	
STREET ADDRESS	9605 N. JUNIPER CIRCLE	
CITY-ST-ZIP	MEQUON WI	
TITLE	D	[■] DELETE
NAME	BROWNING, MARTIN R.	
STREET ADDRESS	338-1 RIVERVIEW DR.	
CITY-ST-ZIP	DELAFIELD WI	
TITLE	D	[ ] DELETE
NAME	WALKER, JOHN C.	
STREET ADDRESS	2237 EDGEWOOD DR	
CITY-ST-ZIP	GRAFTON WI	
TITLE	D	[ ] DELETE
NAME	KREBS, MARTIN J.	
STREET ADDRESS	8116 MILWAUKEE AVE.	
CITY-ST-ZIP	WAUWATOSA WI	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE	[ ] Change	[ ] Addition
1 NAME		
1 STREET ADDRESS		
1 CITY-ST-ZIP		
2 TITLE	[ ] Change	[ ] Addition
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE	[ ] Change	[ ] Addition
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE	[ ] Change	[ ] Addition
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE	[ ] Change	[ ] Addition
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE	[ ] Change	[ ] Addition
6 NAME		
6 STREET ADDRESS		
6 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)(k), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James A. Woodward — James A. Woodward 4/10/96 (414) 258-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)