

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P26150

1. Entity Name

RBP CHEMICAL CORPORATION

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90048 043 ***150.00

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

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number	39-0866582	Applied For	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RAUCH, ROGER 1108 BARCELONA DRIVE KISSIMEE FL 34741	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD KANNENBERG, MARK E. 6364 N. BERKELEY WHITEFISH BAY WI	TITLE	VP ORZIELINSKI, GREGORY H. 7913 W. MANITOBA ST. MILWAUKEE, WI 53219
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D WOODWARD, JAMES A. 4003 PINE HILL BLVD. RACINE WI	TITLE	D KRAFT, ROBERT W. 320 E. BUFFALO ST. MILWAUKEE, WI 53202
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D BEUTNER, GRANT C. 9605 N. JUNIPER CIRCLE MEQUON WI	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D WALKER, JOHN C. 2237 EDGEWOOD DR GRAFTON WI	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	D KREBS, MARTIN J. 8116 MILWAUKEE AVE. WAUWATOSA WI	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	ST NOWAK, PAUL B 3994 S WOODHILL LANE NEW BERLIN WI 53151	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul B. Nowak **CFP/SEC/TREAS** **PAUL B. NOWAK** 1/24/00 414-258-0911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)