PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P95000004020

RWP CAPITAL CORPORATION

Principal Place of Business Mailing Address

FILED 99 OCT 13 AM 9: 25



627 S. RANGE ST. MADISON FL 3234	0	627 S. RANGE ST. MADISON FL 32340			DO NOT WRITE IN THIS SPACE		
					3. Date incorporated or Qualified 01/17/1995		
2. Principal Place	of Business	2a. Mailing Address			4, FEI Number Applied For		
21 26					59-3292342 Not Applicable		
Suite, Apt. #, 6	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State		City & State			6. Election Cempaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip 29	Country 30	y	This corporation owes the current year Intangible Personal Property.		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
				ijŦ	Name		
SCH0E	LLES, PAM			1_			
627 S.	RANGE ST.		82 Street Add		2 Street Address (P.O. Box Number is Not Acceptable)		
MADISON FL 32340			83	1			
			84	1	City FL 85 Zip Code		
office or regi	the provisions of sections 607. istered agent, or both, in the S familiar with, and accept the o	tate of Florida. Such change	was authorized b	y th	e-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered as.		
SIGNATURE							
Sigr	nature, typed or printed name of registered	agent and little if applicable.	(NOTE: Registered	Agen	Agent signature required when reinstating) DATE		

12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition 12 NAME KEELING, JAN N NAME RT. 1 BOX 782 1.3 STREET ADDRESS STREET ADDRESS LEE FL 32059 1.4 CITY-ST-ZIP City-S1-ZiP 2.1 TITLE TITLE DELETE 300000303 22 NAME NAME -026 3 STREET ADORESS STREET ADDRESS ****550.00 ****550.00 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-S1-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 8.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 8.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Floride Statutes. I further certify that the information indicated on this annual report or supplemental annual report is type 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in changed, or on an attachment with an address.

SIGNATURE

10-13-59 Daytime Phone N

(2/38) CR2E034



Cabinet Doors • Mouldings P.O. Box 620 • Madison, Florida 32341-0620 (850) 973-4784 • Fax 1-800-393-7979 Sales 1-800-835-8752

September 29, 1999

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Re:

RWP Capital Corporation

Annual Corporate Report

Second Notice

Dear Gentlemen:

Enclosed is a completed annual report for the above corporation and check for \$550.00. This notice was not received until after the September 15 deadline.

I was not aware that the initial report had not been filed and completed this report immediately.

Sincerely,

Jan Keeling President

Enclosures (2)