

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 813436

(3)

1. Corporation Name

WHIRLPOOL CORPORATION



Principal Place of Business

2000 M63 NORTH
TAX DEPARTMENT
BENTON HARBOR MI 49022

Mailing Address

2000 M63 NORTH
TAX DEPARTMENT
BENTON HARBOR MI 49022

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

3. Date Incorporated or Qualified
03/04/1959

3a. Date of Last Report
05/01/1995

4. FEI Number
38-1490038

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 ☐ Yes ☐ No

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 on separate sheet and attached to this report)

(NOTE: Registered Agent signature must be handwritten)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
VC	SAMARTINI, JAMES R.	1315 LAKE BLVD.	ST JOSEPH MI	<input type="checkbox"/>
C	WHITWAM, DAVID R	1408 MANLEY CT	ST JOSEPH MI	<input type="checkbox"/>
D	BONOMO, VICTOR	7 SMITH RIDGE LANE	NEW CANAAN CT	<input type="checkbox"/>
V	HOLMES, STEPHEN F	2330 LAKESHORE DR	ST JOSEPH MI	<input type="checkbox"/>
PCOO	MAROHN, WILLIAM D.	1109 ST. JOSEPH DRIVE	ST. JOSEPH MI	<input type="checkbox"/>
S	HOPP, DANIEL F.	711 KINGSLEY AVENUE	ST. JOSEPH MI	<input type="checkbox"/>

13.

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.1 TITLE	2.1 NAME	3.1 STREET ADDRESS	4.1 CITY - ST - ZIP	<input type="checkbox"/>
1.2 NAME	2.2 NAME	3.2 STREET ADDRESS	4.2 CITY - ST - ZIP	<input type="checkbox"/>
1.3 STREET ADDRESS	2.3 STREET ADDRESS	3.3 STREET ADDRESS	4.3 CITY - ST - ZIP	<input type="checkbox"/>
1.4 CITY - ST - ZIP	2.4 CITY - ST - ZIP	3.4 CITY - ST - ZIP	4.4 CITY - ST - ZIP	<input type="checkbox"/>
1.5 TITLE	2.5 NAME	3.5 STREET ADDRESS	4.5 CITY - ST - ZIP	<input type="checkbox"/>
1.6 NAME	2.6 NAME	3.6 STREET ADDRESS	4.6 CITY - ST - ZIP	<input type="checkbox"/>
1.7 STREET ADDRESS	2.7 STREET ADDRESS	3.7 STREET ADDRESS	4.7 CITY - ST - ZIP	<input type="checkbox"/>
1.8 CITY - ST - ZIP	2.8 CITY - ST - ZIP	3.8 CITY - ST - ZIP	4.8 CITY - ST - ZIP	<input type="checkbox"/>

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
VICE PRESIDENT, GENERAL COUNSEL, AND SECRETARY

4/26/96

(616) 423-3897

CR2E034 (12/95)