

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 # 842298 (2)

1. Corporation Name

PENN GENERAL SERVICE CORPORATION

Principal Place of Business

400 GALLERIA OFFICENTRE, SUITE 500
P.O. BOX 5007
SOUTHFIELD MI 48066-5007

Mailing Address

400 GALLERIA OFFICENTRE
SUITE 500, PO BOX 500
SOUTHFIELD MI 48034
US



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

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

3. Date Incorporated or Qualified

12/29/1978

3a. Date of Last Report

05/01/1995

4. FEI Number

94-2487580

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 or printed name of registered agent and the applicable

NOTE: Registered Agent Signature is printed when not typed

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME NEWBORN, ERNEST J JR
STREET ADDRESS ACORDIA, INC., 120 MONUMNET CIRCLE
CITY- ST- ZIP INDIANAPOLIS IN

TITLE D ☒ DELETE
NAME SCHNEIDER, ROBERT S
STREET ADDRESS ACORDIA, INC., 120 MONUMENT CIRCLE
CITY- ST- ZIP INDIANAPOLIS IN

TITLE D ☒ DELETE
NAME WITTHUN, FRANK C
STREET ADDRESS ACORDIA, INC., 120 MONUMENT CIRCLE
CITY- ST- ZIP INDIANAPOLIS IN

TITLE P ☐ DELETE
NAME STUMP, DANA L
STREET ADDRESS ACORDIA, 5656 S STAPLES, STE. 330
CITY- ST- ZIP CORPUS CHRISTI TX

TITLE S ☐ DELETE
NAME WILHITE, NANCY K
STREET ADDRESS ACORDIA, INC., 120 MONUMENT CIRCLE
CITY- ST- ZIP INDIANAPOLIS IN

TITLE T ☐ DELETE
NAME VANNEMAN, THOMAS E
STREET ADDRESS ACORDIA, INC., 120 MONUMENT CIRCLE
CITY- ST- ZIP INDIANAPOLIA IN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PRESIDENT ☒ Change ☐ Addition

H. THOMAS WILKINS, III
5605 N. MACARTHUR BLVD, SUITE 870
IRVING, TEXAS 75038

VP ☒ Change ☐ Addition

ROBERT M. OTTMAN
5650 N. MACARTHUR BLVD, SUITE 870
IRVING, TEXAS 75038

ASST TREAS ☒ Change ☐ Addition

JIM LANKENKAMP
5656 SOUTH STAPLES SUITE 330
CORPUS CHRISTI, TEXAS 78411

DIRECTOR ☒ Change ☐ Addition

DANA STUMP
5656 S. STAPLES, STE 330
CORPUS CHRISTI, TEXAS 78411

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

214-580-1089

Date of Signature Printed Name of Signer

CR2E034 (12/95)