

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **856226** (6)

95 FEB 21 AM 9:43

1. Corporation Name
**GENERAL ELECTRIC HOME EQUITY INSURANCE CORPORATI
ON OF NORTH CAROLINA**

Principal Place of Business Main Address
**6601 SIX FORKS ROAD
RALEIGH NC 27615
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/25/1983** 3a. Date of Last Report **02/14/1994**
4. FEI Number **38-2422710** 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
7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL**

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 607.0603 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 of individual named as registered agent or as the incorporator)

(NOTE: Registered Agent signature required when changing)

DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **CD**
12 NAME **BARMORE, GREGORY T**
13 STREET ADDRESS **6601 SIX FORKS ROAD**
14 CITY-ST-ZIP **RALEIGH NC**
15 TITLE **S**
16 NAME **HINKLE, CATHERINE D.**
17 STREET ADDRESS **6601 SIX FORKS ROAD**
18 CITY-ST-ZIP **RALEIGH NC**
19 TITLE **VTD**
20 NAME **BOROM, MICHAEL P**
21 STREET ADDRESS **6601 SIX FORKS ROAD**
22 CITY-ST-ZIP **RALEIGH NC**
23 TITLE **VD**
24 NAME **LOPES, STUART M.**
25 STREET ADDRESS **6601 SIX FORKS ROAD**
26 CITY-ST-ZIP **RALEIGH NC**
27 TITLE **VD**
28 NAME **MILLER, GERHARD A**
29 STREET ADDRESS **6601 SIX FORKS ROAD**
30 CITY-ST-ZIP **RALEIGH NC**
31 TITLE **PD**
32 NAME **HECK, MARTIN H**
33 STREET ADDRESS **6601 SIX FORKS ROAD**
34 CITY-ST-ZIP **RALEIGH NC**

11 TITLE **PCD** Title Change Addition
12 NAME **Barmore, Gregory T.**
13 STREET ADDRESS **6601 Six Forks Road**
14 CITY-ST-ZIP **Raleigh, NC 27615**
15 TITLE Change Addition
16 NAME
17 STREET ADDRESS
18 CITY-ST-ZIP
19 TITLE Change Addition
20 NAME
21 STREET ADDRESS
22 CITY-ST-ZIP
23 TITLE Change Addition
24 NAME
25 STREET ADDRESS
26 CITY-ST-ZIP
27 TITLE Change Addition
28 NAME
29 STREET ADDRESS
30 CITY-ST-ZIP
31 TITLE Change Addition
32 NAME **MD**
33 NAME **Heck, Martin H.**
34 STREET ADDRESS **6601 Six Forks Road**
35 CITY-ST-ZIP **Raleigh, NC 27615**

14. I hereby certify that the information supplied with this filing is voluntarily furnished and that I am equally for the descriptions stated in Section 119 (2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect and I hereby declare that I am an officer or director of the corporation or the incorporator thereof 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 attached sheet with an address.

SIGNATURE: _____

Jeannie B. Green

Jeannie B. Green

2/1/95

(919) 846-4187