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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000000302 (8)

1. Corporation Name

METLIFE CAPITAL FINANCIAL CORPORATION



Principal Place of Business

Mailing Address

15915 KATY FREEWAY
150
HOUSTON TX 77094
US

15915 KATY FREEWAY
150
HOUSTON TX 77094-1707
US

3. Date Incorporated or Qualified

01/19/1995

3a. Date of Last Report

05/01/1996

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 25 29 30

4. FEI Number

76-0411394

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. SEE ATTACHED OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME WATERFIELD, WILLIAM M
STREET ADDRESS 10900 N.E. 4TH ST., #500
CITY-ST-ZIP BELLEVUE WA

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP 98004

TITLE V
NAME WORTHEN, LLOYD R
STREET ADDRESS 10900 N.E. 4TH ST., #500
CITY-ST-ZIP BELLEVUE WA 98004

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VTS
NAME REINER, JOHN J
STREET ADDRESS 3050 POST OAK BLVD., #500
CITY-ST-ZIP HOUSTON TX

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 15915 Katy Fwy. #150
3.4 CITY-ST-ZIP 77094

TITLE DC
NAME MORRISON, JOHN C JR
STREET ADDRESS ONE MADISON AVE.
CITY-ST-ZIP NEW YORK NY

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME CORNWALL, JOHN R
STREET ADDRESS 10900 N.E. 4TH ST., #500
CITY-ST-ZIP BELLEVUE WA 98004

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 included 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: John J. Reiner

4/22/97 (281) 398-8885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

**METLIFE CAPITAL FINANCIAL CORPORATION
OFFICERS AND DIRECTORS**

OFFICERS:

Michael E. Taft
Executive Vice President
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 479-44-6834

John J. Reiner
Vice President, Controller,
Treasurer, & Secretary
15915 Katy Freeway, Ste. 150
Houston, TX 77094
SSN: 527-21-9214

William M. Waterfield
President
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 073-34-9811

Lloyd R. Worthen
Vice President
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 531-56-6841

DIRECTORS:

Michael D. Cullen
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 341-44-0709

Mike Taft
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 479-44-6834

John R. Cornwall
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 483-50-6069

Paul J. Graf
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 356-38-3342

Timothy L. Johnson
10900 NE 4th Street, Ste. 500
Bellevue, WA 98004
SSN: 566-60-6554