

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

**APPROVED AND FILED**

**95 APR 26 PM 2:05**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION ANNUAL REPORT 1995**

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



**DOCUMENT # P25354 (2)**

1. Corporation Name  
**FIGGIE ACCEPTANCE CORPORATION**

Principal Place of Business: **4420 SHERWIN ROAD WILLOUGHBY OH 44094**

Mailing Address: **4420 SHERWIN ROAD WILLOUGHBY OH 44094**

DO NOT WRITE IN THIS SPACE.

|   |         |                     |         |  |                                       |
|---|---------|---------------------|---------|--|---------------------------------------|
| 2. Principal Place of Business                  |         | 2a. Mailing Address |         | 3. Date Incorporated or Qualified                      | 3a. Date of Last Report               |
| 21  |         | 26                  |         | <b>07/27/1989</b>                                      | <b>05/01/1994</b>                     |
| Suite, Apt. #, etc.                             |         | Suite, Apt. #, etc. |         | 4. FEI Number  | Applied For                           |
| 22  |         | 27                  |         | <b>34-1114737</b>                                      | Not Applicable                        |
| City & State                                    |         | City & State        |         | 5. Certificate of Status Desired                       | <b>\$8.75 Additional Fee Required</b> |
| 23  |         | 28                  |         | <input type="checkbox"/>                               |                                       |
| Zip   | Country | Zip                 | Country | 6. Election Campaign Financing Trust Fund Contribution | <b>\$5.00 May Be Added to Fees</b>    |
| 24  | 25      | 29                  | 30      | <input type="checkbox"/>                               |                                       |
| 9. Name and Address of Current Registered Agent |         |                     |         | 10. Name and Address of New Registered Agent           |                                       |

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

|    |  |
|----|--|
| 81 | Name   |
| 82 | Street Address (P.O. Box Number is Not Acceptable) |
| 83 |  |
| 84 | City   |
| 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering)

| 12. OFFICERS AND DIRECTORS |                         | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|-------------------------|---|---|
| TITLE                      | AS                      | 1.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | COSTELLO, CHERI A       | 1.2 NAME  |   |
| STREET ADDRESS             | 8478 SEATON PLACE       | 1.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | MENTOR OH               | 1.4 CITY-ST-ZIP                                       |   |
| TITLE                      | AT                      | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | SCHULTE, JAMES M.       | 2.2 NAME  |   |
| STREET ADDRESS             | 4420 SHERWIN ROAD       | 2.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | WILLOUGHBY OH           | 2.4 CITY-ST-ZIP                                       |   |
| TITLE                      | D                       | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | CHIARUCCI, VINCENT A    | 3.2 NAME  |   |
| STREET ADDRESS             | 28 HUNTING HOLLOW       | 3.3 STREET ADDRESS                                    | <i>delete</i>   |
| CITY-ST-ZIP                | PEPPER PIKE OH          | 3.4 CITY-ST-ZIP                                       |   |
| TITLE                      | SD                      | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | HARTHUN, LUTHER A.      | 4.2 NAME  |   |
| STREET ADDRESS             | 7280 HILLBROOK LANE S.  | 4.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                | NOVELTY OH              | 4.4 CITY-ST-ZIP                                       |   |
| TITLE                      | AS                      | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | BATTAGLIA, SALVATORE J. | 5.2 NAME  |   |
| STREET ADDRESS             | 1188 DOLLY COURT        | 5.3 STREET ADDRESS                                    | <i>delete</i>   |
| CITY-ST-ZIP                | WESTERVILLE OH          | 5.4 CITY-ST-ZIP                                       |   |
| TITLE                      | AT                      | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | BYER, JAMES L           | 6.2 NAME  |   |
| STREET ADDRESS             | 31900 FARM DR           | 6.3 STREET ADDRESS                                    | <i>See Schedule Attached</i>                                      |
| CITY-ST-ZIP                | SOLOM OH                | 6.4 CITY-ST-ZIP                                       |   |

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 of this report, or on an attachment with an address.

SIGNATURE: James M. Schulte Date: 4/1/95 216-953-2861

025354

**FIGGIE ACCEPTANCE CORPORATION**

**List of Officers and Directors**

**OFFICERS**

|                       |                                    |   |
|-----------------------|------------------------------------|---|
| President & Treasurer | Richard J. Subel<br>276-46-3021    | 40 Highland Lane<br>Chagrin Falls, OH 44022   |
| Vice-Pres- Secretary  | Luther A. Harthun ✓<br>313-36-4296 | 7620 Hillbrook Lane<br>Novelty, OH 44072      |
| Vice President        | Larry L. Snyder<br>268-38-2887     | 569 E. 331 Street<br>Eastlake, OH 44095       |
| Assistant Treasurer   | James L. Byer ✓<br>345-26-9851     | 31900 Farm Drive<br>Solon, OH 44139           |
| Assistant Treasurer   | James M. Schulte ✓<br>279-62-9706  | 1055 S. Hametown<br>Copley, OH 44321          |
| Assistant Secretary   | Cheri A. Costello ✓<br>297-44-3196 | 8478 Seaton Place<br>Mentor, OH 44060         |
| Assistant Secretary   | Robert D. Vilsack<br>296-62-4020   | 8240 Tewksbury Lane<br>Concord Twp., OH 44060 |
| Assistant Secretary   | Doug Dimond<br>270-44-4410         | 24180 Palm Drive<br>North Olmsted, OH 44070   |

**DIRECTORS**

|   |   |  |
|---|---|--|
| Luther A. Harthun<br>7620 Hillbrook Lane S.<br>Novelty, OH 44072<br>313-36-4296 | Steve Siemborski<br>1440 Chagrin River Road<br>Gates Mills, OH 44040<br>276-44-7841 | Richard J. Subel<br>40 Highland Lane<br>Chagrin Falls, OH 44022<br>276-46-3021 |
|---|---|--|