2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#812892

Entity Name: WHIRLPOOL FINANCIAL CORPORATION

FILED May 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2000 N M-63 MD 2901 BENTON HARBOR, MI 49022 US **New Mailing Address: Current Mailing Address:** 2000 N M-63 MD 2901 BENTON HARBOR, MI 49022 US FEI Number: 38-1544247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HOPP, DANIEL F Name: Name: 2000 N M-63 Address: Address: City-St-Zip: BENTON HARBOR, MI 49022 City-St-Zip: Title: Title: () Delete () Change () Addition Name: CLARK, BLAIR Name: Address: 2000 N M-63 Address: City-St-Zip: BENTON HARBOR, MI 49022 City-St-Zip: Title: () Delete Title: () Change () Addition BARRETT, STEPHEN R Name: Name: Address: 2000 N M-63 Address: City-St-Zip: BENTON HARBOR, MI 49022 City-St-Zip: Title: () Delete Title: () Change () Addition Name: KENAGY, ROBERT T Name: Address: 2000 N M-63 Address: City-St-Zip: BENTON HARBOR, MI 49022 City-St-Zip: Title: () Delete Title: () Change () Addition LAFOREST, ROBERT Name: Name: 2000 N M-63 Address: Address: BENTON HARBOR, MI 49022 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition BEATY, BETTY ROY TEMPLIN W Name: Name: 2000 N M-63 Address: Address: 2000 N M-63 BENTON HARBOR, MI 49022 BENTON HARBOR, MI 49022 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT LAFOREST VS 05/12/2004