

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 818606 (6)

1. Corporation Name
VEREX ASSURANCE, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
131 WEST WILSON STREET MADISON WI 53703 US		6601 SIX FORKS RD RALEIGH NC 27615 US	
21	22	26	27
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
23	24	28	29
Zip		Zip	
25	25	30	30
Country		Country	

3. Date Incorporated or Qualified
03/24/1965

4. FEI Number
39-0986894

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

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

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	MD	<input type="checkbox"/> DELETE
NAME	HECK, MARTIN H	
STREET ADDRESS	6601 SIX FORKS RD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	SVPD	<input checked="" type="checkbox"/> DELETE
NAME	LITTLES, CAROLYN S.	
STREET ADDRESS	6601 SIX FORKS ROAD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	HINKLE, CATHERINE D.	
STREET ADDRESS	6601 SIX FORKS ROAD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	C	<input checked="" type="checkbox"/> DELETE
NAME	BARMORE, GREGORY T	
STREET ADDRESS	6601 SIX FORKS RD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GREEN, JEANIE B	
STREET ADDRESS	6601 SIX FORKS RD	
CITY-ST-ZIP	RALEIGH NC	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MANN, THOMAS H.	
STREET ADDRESS	6601 SIX FORKS ROAD	
CITY-ST-ZIP	RALEIGH NC	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	V/D Weiland, Theodore
23 STREET ADDRESS	6601 Six Forks Road
24 CITY-ST-ZIP	Raleigh, NC 27615
31 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	V/S Taggart, John C.
33 STREET ADDRESS	6601 Six Forks Road
34 CITY-ST-ZIP	Raleigh, NC 27615
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	V/T Marsico, Samuel D.
43 STREET ADDRESS	6601 Six Forks Road
44 CITY-ST-ZIP	Raleigh, NC 27615
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I 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 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 *Jeannie B. Green* Jeannie B. Green 2/25/98 (919) 846-4187

CR2E034 (10/97)