FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

95 APR 10 PM 8:59

DOCUMENT # 845870 (5)

1. Corporation Name

METMOR FINANCIAL, INC.

600001453946
-04/12/95--01016--016
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
Attn: Legal Department 9225 Indian Creek Pkwy. S-300 Overland Park, KS 66210	Attn: Legal Department 9225 Indian Creek Pkwy.S300 Overland Park, KS 66210

3. Date Incorporated or Qualified: 05/01/1980
3a. Date of Last Report: 04/13/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 95-3425614 ☐ 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 XX 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 607.0502 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 _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President/CEO	11 TITLE	☐ Change ☐ Addition
NAME	Patricia A. Reichert	12 NAME	
STREET ADDRESS	9225 Indian Creek Parkway, Ste. 300	13 STREET ADDRESS	
CITY ST ZIP	Overland Park, KS 66210	14 CITY ST ZIP	
TITLE	Chairman	21 TITLE	☐ Change ☐ Addition
NAME	Gerald Clark	22 NAME	
STREET ADDRESS	1 Madison Avenue	23 STREET ADDRESS	
CITY ST ZIP	New York, NY 10010	24 CITY ST ZIP	
TITLE	Director	31 TITLE	☐ Change ☐ Addition
NAME	James B. Digney	32 NAME	
STREET ADDRESS	1 Madison Avenue	33 STREET ADDRESS	
CITY ST ZIP	New York, NY 10010	34 CITY ST ZIP	
TITLE	Senior Vice President	41 TITLE	☐ Change ☐ Addition
NAME	John A. Holtmann	42 NAME	
STREET ADDRESS	9225 Indian Creek Parkway, Ste. 300	43 STREET ADDRESS	
CITY ST ZIP	Overland Park, KS 66210	44 CITY ST ZIP	
TITLE	Vice President/Treasurer	51 TITLE	☐ Change ☐ Addition
NAME	Terry W. Crawford	52 NAME	
STREET ADDRESS	9225 Indian Creek Parkway, Ste. 300	53 STREET ADDRESS	
CITY ST ZIP	Overland Park, KS 66210	54 CITY ST ZIP	
TITLE	Senior Vice President	61 TITLE	☐ Change ☐ Addition
NAME	Eugene B. Anstey, Jr.	62 NAME	
STREET ADDRESS	9225 Indian Creek Parkway, Ste. 300	63 STREET ADDRESS	
CITY ST ZIP	Overland Park, KS 66210	64 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)(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: _____ 3/30/95 913-661-0555
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR (Date) (Telephone Number)
John A. Holtmann, Senior Vice President

KW 4-10-95