

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

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DOCUMENT # F93000005051 (8)

1. Corporation Name

AMERUS PROPERTIES, INC.



Principal Place of Business

6000 WESTOWN PKWY
STE 200W
WEST DES MOINES IA 50266
US

Mailing Address

6000 WESTOWN PKWY
STE 200W
WEST DES MOINES IA 50266
US

2. Principal Place of Business

2a. Mailing Address

21 4949 Westown Parkway

26 4949 Westown Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 245

27 245

City & State

23 West Des Moines, IA

City & State

28 West Des Moines, IA

Zip

24 50266

Country

25 U.S.

Zip

29 50266

Country

30 U.S.

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

11/08/1993

3a. Date of Last Report

06/05/1995

4. FEI Number

42-1355396

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. 193.032,
Florida Statutes ☐ Yes ☒ No

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required for all non-statewide)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD
KNAPP, WILLIAM C II
5221 NW 70TH PLACE
JOHNSTON IA 50131

☐ DELETE

V
HARRIS, SCOTT D
13200 HICKORY AVENUE
DES MOINES IA 50325

☒ DELETE

GCS
DAVIDSON, DIANE M
913 48TH STREET
WEST DES MOINES IA 50265

☐ DELETE

VT
HARRIS, GENE
225 SOUTH 27TH STREET
WEST DES MOINES IA 50265

☐ DELETE

V
TROESTER, KEITH R
2411 N 15TH ST
ADEL IA

☒ DELETE

AS
ANDREINI, LINDA
1104 RAPIDS
ADEL IA 50003

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

V
Roger W. Langpaul
14162 West Pointe Drive
Clive, IA 50325

☒ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

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

V
Evan L. Oster
7205 Twana Drive
Urbandale, IA 50322

☒ Change ☐ Addition

☐ Change ☐ Addition

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 if changed, or on an attachment with an address.

SIGNATURE:

Diane M Davidson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EO

Date of Filing

CR2E034 (12/95)

Additional Officers & Directors

F93000005051

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TITLE D
NAME Thomas C. Godlasky
STREET ADDRESS 1516 South 42nd Street
CITY-ST-ZIP West Des Moines, IA 50265

TITLE D
NAME Michael Frazier
STREET ADDRESS 10577 Elmcrest Drive
CITY-ST-ZIP Des Moines, IA 50325