


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

FILED
Aug 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F95000006305 (5) 1. Corporation Name WHIRLPOOL FINANCIAL CORPORATION OVERSEAS					
Principal Place of Business 553 BENSON ROAD BENTON HARBOR MI 49022			Mailing Address 553 BENSON ROAD BENTON HARBOR MI 49022		
2. Principal Place of Business 21 2000 N. M-63, MD1211 Suite, Apt. #, etc. 22 City & State 23 BENTON HARBOR MI Zip Country 24 49022 25 USA		2a. Mailing Address 26 2000 N. M-63, MD1211 Suite, Apt. #, etc. 27 City & State 28 BENTON HARBOR MI Zip Country 29 49022 30 USA		3. Date Incorporated or Qualified 12/28/1995 4. FEI Number NOT APPLICABLE Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> DELETE	
	PDC	LEBLANC, JAMES E	553 BENSON ROAD BENTON HARBOR MI		
	V	KLEINMAN, DAVID	555 BENSON ROAD BENTON HARBOR MI	<input checked="" type="checkbox"/> DELETE	
	S	ROSENBERG, MARSHALL E	553 BENSON ROAD BENTON HARBOR MI	<input checked="" type="checkbox"/> DELETE	
	T	BELL, BRADLEY J	2000 M-63 NORTH BENTON HARBOR MI	<input checked="" type="checkbox"/> DELETE	
	VD	MOGAVERO, GERALD A	553 BENSON ROAD BENTON HARBOR MI	<input checked="" type="checkbox"/> DELETE	
	VD	PETERS, BRIAN F	553 BENSON ROAD BENTON HARBOR MI	<input type="checkbox"/> 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	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
P	MICHAEL C LAKE	2000 N. M-63 BENTON HARBOR MI	49022		
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
VD	BRIAN L CHAMNESS	2000 N. M-63 BENTON HARBOR MI	49022		
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
VS	C. LAURENCE YINGER	2000 N. M-63 BENTON HARBOR MI	49022		
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
VSD	ROBERT A. KENALY	2000 N. M-63 BENTON HARBOR MI	49022		
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
VTD	BRIAN F. PETERS	2000 N. M-63 BENTON HARBOR MI	49022		

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: _____

CR2E034 (10/97)