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Apr 03 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G60022 (2)

1. Corporation Name  
KNAPP REALTY COMPANY



Principal Place of Business 5000 WESTOWN PARKWAY SUITE 100 WEST DES MOINES IA 50266 US	Mailing Address 5000 WESTON PKWY SUITE 100 WEST DES MOINES IA 50266-5921 US
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3. Date Incorporated or Qualified 09/19/1983	3a. Date of Last Report 04/02/1996
4. FEI Number 59-2347006	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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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9. Name and Address of Current Registered Agent

HARDT, FREDERICK R.  
801 LAUREL OAK DRIVE  
SUITE 705, SUN BANK BLDG.  
NAPLES FL 33963

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 reinstalling) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD KNAPP, PAUL R. 3501 WESTOWN PKWY W DES MOINES IA	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SD KNAPP, WILLIAM C. II 4949 WESTON PARKWAY SUITE 245 W DES MOINES IA	1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	S HARDT, FREDERICK R. 400 5TH AVE S NAPLES FL	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TD NEUMANN, DARYL 5000 WESTOWN PKWY SUITE 100 WEST DES MOINES IA	2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	699 Walnut Street - Suite 1700 Des Moines, IA 50309-3945
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	PD KNAPP, WILLIAM C. 5000 WESTOWN PARKWAY SUITE 100 WEST DES MOINES IA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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, unchanged, or on an attachment with an address.

SIGNATURE:   
William C. Knapp, President  
3/19/97 515/283-4000  
Date Daytime Phone

CR2E034 (9/96)