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

DOCUMENT # P20878 (5)

1. Corporation Name
FORETHOUGHT FLORIDA, INC.

Principal Place of Business
FORETHOUGHT CENTER
BATESVILLE IN 47006
US

Mailing Address
FORETHOUGHT CENTER
BATESVILLE IN 47006
US

3. Date Incorporated or Qualified: 09/14/1988
3a. Date of Last Report: 02/08/1995
4. FEI Number: 35-1743639 [ ] 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 [X] No

2. Principal Place of Business
21 700 State Route 46E
Suite, Apt. #, etc.
22
City & State
23 Batesville, IN
Zip
24 ~~Ind~~ 47006
Country
25 US

2a. Mailing Address
26 700 State Route 46E
Suite, Apt. #, etc.
27
City & State
28 Batesville, IN
Zip
29 47006
Country
30 US

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

12. OFFICERS AND DIRECTORS

TITLE	VPD	[X] DELETE
NAME	BONAFAIR, JOHN M.	
STREET ADDRESS	FORETHOUGHT CENTER	
CITY-ST-ZIP	BATESVILLE IN 47006	
TITLE	P/D	[ ] DELETE
NAME	FREDERICK W. ROCKWOOD	
STREET ADDRESS	FORETHOUGHT CENTER	
CITY-ST-ZIP	BATESVILLE IN 47006	
TITLE	S/D	[ ] DELETE
NAME	JUDITH WRIGHT	
STREET ADDRESS	FORETHOUGHT CENTER	
CITY-ST-ZIP	BATESVILLE IN 47006	
TITLE	T/D	[ ] DELETE
NAME	RICHARD N. COFFIN	
STREET ADDRESS	FORETHOUGHT CENTER	
CITY-ST-ZIP	BATESVILLE IN 47006	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE		[ ] Change [ ] Addition
1 2 NAME		
1 3 STREET ADDRESS		
1 4 CITY-ST-ZIP		
2 1 TITLE		[X] Change [ ] Addition
2 2 NAME		
2 3 STREET ADDRESS	State Route 46E	
2 4 CITY-ST-ZIP		
3 1 TITLE		[X] Change [ ] Addition
3 2 NAME		
3 3 STREET ADDRESS	State Route 46E	
3 4 CITY-ST-ZIP		
4 1 TITLE		[X] Change [ ] Addition
4 2 NAME		
4 3 STREET ADDRESS	State Route 46E	
4 4 CITY-ST-ZIP		
5 1 TITLE		[ ] Change [ ] Addition
5 2 NAME		
5 3 STREET ADDRESS		
5 4 CITY-ST-ZIP		
6 1 TITLE		[ ] Change [ ] Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 CITY-ST-ZIP		

CR2E034 (12/95)

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: Richard N. Coffin (812)934-7827
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Richard N. Coffin Asst Treasurer