

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

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P27321** (9)

1. Corporation Name

**REMCO AMERICA, INC.**



Principal Place of Business

Mailing Address

10333 RICHMOND AVE., SUITE 300  
HOUSTON TX 77042

10333 RICHMOND AVE., SUITE 300  
HOUSTON TX 77042

2. Principal Place of Business

21. **8200 E. THORN Dr.**  
Subj. Apt. #, etc.

2a. Mailing Address

26. **P.O. Box 789759**  
Subj. Apt. #, etc.

22. City & State

23. **Wichita, KS**

27. City & State

28. **Wichita, KS**

24. Zip **67226** 25. Country **US**

29. Zip **67278** 30. Country **US**

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.**  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified  
**12/15/1989**

3a. Date of Last Report  
**06/26/1995**

4. FTL Number  
**76-0195669**

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  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 607.1506, 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 607.0129, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of the Agent or Director in 12

DATE

12. OFFICERS AND DIRECTORS		
NAME	<b>D GATES, BUD</b>	<input type="checkbox"/> DELETE
STREET ADDRESS	<b>8200 RENT A CENTER DR</b>	
CITY, STATE, ZIP	<b>WICHITA KS</b>	
NAME	<b>D SKOLIS, JOHN</b>	<input type="checkbox"/> DELETE
STREET ADDRESS	<b>2751 CENTERVILLE RD., #205</b>	
CITY, STATE, ZIP	<b>WILMINGTON DE</b>	
NAME	<b>WALL, KEITH</b>	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS	<b>10333 RICHMOND #300</b>	
CITY, STATE, ZIP	<b>HOUSTON TX</b>	
NAME	<b>WELCH, MIKE</b>	<input type="checkbox"/> DELETE
STREET ADDRESS	<b>10333 RICHMOND STE 300</b>	
CITY, STATE, ZIP	<b>HOUSTON TX</b>	
NAME		<input type="checkbox"/> DELETE
STREET ADDRESS		
CITY, STATE, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Add on
12 NAME		
13 STREET ADDRESS	<b>8200 E. THORN Dr.</b>	
14 CITY, ST, ZIP		
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS	<b>8200 E. THORN Dr.</b>	
44 CITY, ST, ZIP	<b>Wichita, KS 67226</b>	
51 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	<b>VP</b>	
53 STREET ADDRESS	<b>Vincent G. Watkins</b>	
54 CITY, ST, ZIP	<b>8200 E. THORN Dr.</b>	
55 TITLE	<b>Wichita, KS 67226</b>	
62 NAME	<b>VP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
63 STREET ADDRESS	<b>Gene Kash</b>	
64 CITY, ST, ZIP	<b>8200 E. THORN Dr.</b>	
	<b>Wichita, KS 67226</b>	

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)(b), Florida Statutes. I further certify that the information included 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: *Phyllis H. Greif* **Phyllis H. Greif, Asst. Treas.** 2/9/96 316-636-7282  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

REMCO AMERICA, INC  
8200 E. THORN DR., WICHITA, KS 67226  
SCHEDULE OF OFFICERS AND DIRECTORS

Arendt, Steve  
8200 E. THORN Dr.  
Wichita, KS 67226  
Vice-President

Severson, Todd  
8200 E. THORN Dr.  
Wichita, KS 67226  
Vice-President

Kennedy, Rob  
8200 E. THORN Dr.  
Wichita, KS 67226  
Vice-President

Greif, Phyllis H.  
8200 E. THORN Dr.  
Wichita, KS 67226  
Assistant Treasurer