

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

**FILED**

**May 11 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P27321 (9)**

1. Corporation Name  
**REMCO AMERICA, INC.**



Principal Place of Business <b>8200 E THORN DRIVE WICHITA KS 67226 US</b>	Mailing Address <b>POST OFFICE BOX 789759 WICHITA KS 67278 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	30 Country

3. Date Incorporated or Qualified <b>12/15/1989</b>	
4. FEI Number <b>76-0195669</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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

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

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>UNDERWOOD, RANDY L.</b>	1.2 NAME	
STREET ADDRESS	<b>8200 E THORN DR</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WICHITA KS</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VPT</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DANIELS, BARBARA</b>	2.2 NAME	
STREET ADDRESS	<b>8200 E THORN DR</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WILMINGTON DE</b>	2.4 CITY-ST-ZIP	
TITLE	<b>VP</b>	3.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>KENNEDY, ROBERT</b>	3.2 NAME	<b>Secretary</b>
STREET ADDRESS	<b>8200 E THORN DR</b>	3.3 STREET ADDRESS	<b>Douglas B. Westerhaus</b>
CITY-ST-ZIP	<b>WICHITA KS</b>	3.4 CITY-ST-ZIP	<b>1686 Glasgow</b>
TITLE	<b>VP</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BAIN, DONALD</b>	4.2 NAME	
STREET ADDRESS	<b>8200 E THORN DR</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WICHITA KS</b>	4.4 CITY-ST-ZIP	
TITLE	<b>S</b>	5.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>HLAVECEK, JOSEPH</b>	5.2 NAME	<b>Director</b>
STREET ADDRESS	<b>8200 E THORN DR</b>	5.3 STREET ADDRESS	<b>Joseph S. Kieffer</b>
CITY-ST-ZIP	<b>WICHITA KS</b>	5.4 CITY-ST-ZIP	<b>8200 E Thorn Dr.</b>
TITLE	<b>AT</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GRIEF, PHYLLIS H.</b>	6.2 NAME	
STREET ADDRESS	<b>8200 E THORN DR</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WICHITA KS</b>	6.4 CITY-ST-ZIP	

3.4 CITY-ST-ZIP	<b>Wichita, KS 67204</b>
5.4 CITY-ST-ZIP	<b>Wichita, KS 67226</b>

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 *[Handwritten Signature]* **4/22/98** **211 631 2200**

CR2E034 (10/97)

REMCO America, Inc.  
8200 E. THORN DR., WICHITA, KS 67226  
SCHEDULE OF OFFICERS AND DIRECTORS

Underwood, Randall L. #9 Douglas Wichita, KS 67207	President, Director 509-52-1310
Daniels, Barbara J. 2009 Loomis Dr. Augusta, KS 67010	Vice-President & Treasurer  511-72-2726
Bain, Donald R. 7027 Rockwood Wichita, KS 67230	Vice-President  496-52-7592
Westerhaus, Douglas B. 1686 Glasgow Wichita, KS 67206	Secretary  512-52-6401
Greif, Phyllis H. 4110 N. Tara Circle Wichita, KS 67226	Assistant Treasurer  400-76-7530
Kieffer, Joseph S. 9 Hillcrest Wichita, KS 67208	Director  230-52-8644