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

APPROVED AND FILED
96 FEB 29 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P30436 (0)

1. Corporation Name
UNITED COMPANIES LENDING CORPORATION

Principal Place of Business
4041 ESSEN LANE
P. O. BOX 1591
BATON ROUGE LA 70809
US

Mailing Address
ATTN: LEGAL COMPLIANCE
P.O. BOX 1591
BATON ROUGE LA 70821-1591
US

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 08/06/1990
3a. Date of Last Report: 05/01/1995
4. FEI Number: 72-1168195 ☐ 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

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 ______ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	☐ DELETE
NAME	BROWN, J. TERRELL	
STREET ADDRESS	4041 ESSEN LANE	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	PD	☒ DELETE
NAME	CLARK, W. ROGER	
STREET ADDRESS	4041 ESSEN LANE	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	S	☐ DELETE
NAME	ANDERSON, SHERRY	
STREET ADDRESS	4041 ESSEN LANE	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	T	☐ DELETE
NAME	MARTIN, LAURA T.	
STREET ADDRESS	4041 ESSEN LANE	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	D	☐ DELETE
NAME	REDMAN, DALE E	
STREET ADDRESS	4041 ESSEN LANE	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	V	☐ DELETE
NAME	FREEMAN, DOUGLAS L	
STREET ADDRESS	4041 ESSEN LANE	
CITY-ST-ZIP	BATON ROUGE LA	

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	PD	☐ Change ☒ Addition
2.2 NAME	C. GERON HARGON	
2.3 STREET ADDRESS	4041 ESSEN LANE	
2.4 CITY-ST-ZIP	BATON ROUGE, LA	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
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		

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****200.00 ****200.00

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: ______ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BYRON KANTROW, JR., VICE PRESIDENT

FEBRUARY 23, 1996 (Date) (800) 766-0220 (Daytime Phone #)

CR2E034 (12/95)