

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

FILED
Mar 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P36779 (7)
 1. Corporation Name
LINSEY MORDEN CLAIMS MANAGEMENT, INC.



Principal Place of Business 3910 BROOKSIDE DR. SUITE 200 TYLER TX 75701 US	Mailing Address P.O. BOX 6030 TYLER TX 75711-6030
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/19/1991

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

4. FEI Number 75-2356072	Applied For <input type="checkbox"/> 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 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

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

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

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	POLLEY, KEN H.	
STREET ADDRESS	3910 BROOKSIDE DR.	
CITY-ST-ZIP	TYLER TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	QUIN, DON	
STREET ADDRESS	3910 BROOKSIDE DR.	
CITY-ST-ZIP	TYLER TX	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	NEAL, RANDALL	
STREET ADDRESS	3910 BROOKSIDE DR.	
CITY-ST-ZIP	TYLER TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MAGGI, PAUL	
STREET ADDRESS	3910 BROOKSIDE DR.	
CITY-ST-ZIP	TYLER TX	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SMITH, DONALD B	
STREET ADDRESS	3910 BROOKSIDE DR.	
CITY-ST-ZIP	TYLER TX 75701	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 in an attachment with an address.

SIGNATURE: *Ken H. Polley* *Paul R. Maggi* **3/20/98 (903) 561-6700**

CR2E034 (10/97)

LINDSEY MORDEN CLAIM SERVICES, INC.

OFFICERS

KENNETH RICHARD POLLEY
Chairman and Chief Executive Officer

3910 Brookside Drive
Tyler, TX 75701

DONALD BARRY SMITH
President

3910 Brookside Drive
Tyler, TX 75701

DON LESTER GUIN
Senior Vice President, Corporate Treasurer
and Chief Legal Officer

3910 Brookside Drive
Tyler, TX 75701

WILLIAM BENJAMIN MARTIN
Senior Vice President, Eastern Division

Suite 440
210 Interstate North Parkway
Atlanta, GA 30339

JESMANUEL FERDINAND ROIBAS
Senior Vice President, Finance & Operations

3910 Brookside Drive
Tyler, TX 75701

JERRY KEITH TILLEY
Senior Vice President

3910 Brookside Drive
Tyler, TX 75701

JAMES NORMAN STEWART
Vice President

3910 Brookside Drive
Tyler, TX 75701

DIRECTORS

KENNETH RICHARD POLLEY
CHAIRMAN

3910 Brookside Drive
Tyler, TX 75701

VIVIAN PREM WATSA

c/o Fairfax
95 Wellington St. West, Suite 800
Toronto, Ontario Canada M5J 2N7

ERIC PAUL SALSBERG

c/o Fairfax
As above. .

DON LESTER GUIN

3910 Brookside Drive
Tyler, TX 75701

DONALD BARRY SMITH

3910 Brookside Drive
Tyler, TX 75701

WILLIAM BENJAMIN MARTIN

210 Interstate North Parkway, #440
Atlanta, GA 30339

NICHOLAS PAGE

7 Ravenslea Road
London SW12 8SA ENGLAND