

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

**APPROVED
AND
FILED**

95 MAY -1 PM 2:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Montoya Secretary of State One Santa Fe Circle, Tallahassee, FL 32304
---	---	--

DOCUMENT # P37453 (8)
1. Corporation Name: FMRP INC.

Principal Place of Business 1615 POYDRAS ST. NEW ORLEANS LA 70112 US	Mailing Address P.O. BOX 61119 ATTN: TAX DEPT. NEW ORLEANS LA 70161 US
--	--

DO NOT WRITE IN THIS SPACE

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

3. Date Registered or Qualified 02/11/1992	3a. Date of Last Report 05/01/1994
4. FBI Number 72-1122135	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 C T CORPORATION SYSTEM 1200 SOUTH 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 607.05(1) and 607.15(6), 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 set forth in Section 607.05(1), Florida Statutes.

SIGNATURE: R. Foster Duncan (Print Name) (Typed Name) (Print Name) (Typed Name) (Print Name) (Typed Name)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If Any)	
TITLE D	NAME AMATO, JOHN G	1. TITLE ☐ Change ☐ Addition	
STREET ADDRESS 1615 POYDRAS ST.		2. NAME	
CITY, ST, ZIP NEW ORLEANS LA		3. STREET ADDRESS	
		4. CITY, ST, ZIP	
TITLE VT	NAME WOHLBER, ROBERT M	5. TITLE ☒ Change ☐ Addition	
STREET ADDRESS 1615 POYDRAS ST.		6. NAME	
CITY, ST, ZIP NEW ORLEANS LA		7. STREET ADDRESS	
		8. CITY, ST, ZIP	
TITLE PDC	NAME LATLOLAIS, RENE L.	9. TITLE ☐ Change ☐ Addition	
STREET ADDRESS 1615 POYDRAS STREET		10. NAME	
CITY, ST, ZIP NEW ORLEANS LA		11. STREET ADDRESS	
		12. CITY, ST, ZIP	
TITLE V	NAME BECNEL, R. J.	13. TITLE ☐ Change ☐ Addition	
STREET ADDRESS 1615 POYDRAS STREET		14. NAME	
CITY, ST, ZIP NEW ORLEANS LA		15. STREET ADDRESS	
		16. CITY, ST, ZIP	
TITLE V	NAME COMBS, J. R.	17. TITLE ☐ Change ☐ Addition	
STREET ADDRESS 1615 POYDRAS STREET		18. NAME	
CITY, ST, ZIP NEW ORLEANS LA		19. STREET ADDRESS	
		20. CITY, ST, ZIP	
TITLE S	NAME KILANOWSKI, MICHAEL C	21. TITLE ☐ Change ☐ Addition	
STREET ADDRESS 1615 POYDRAS STREET		22. NAME	
CITY, ST, ZIP NEW ORLEANS LA		23. STREET ADDRESS	
		24. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law from 199.032(1)(b), 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 this corporation or the registered office corporation. I am making 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: R. Foster Duncan R. Foster Duncan 4/28/95 504-582-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

037453

FMRP Inc.

Federal ID # 72-1122135

Directors:

<u>Individual</u>	<u>Business Address</u>
John G. Amato	1615 Poydras St., New Orleans, LA 70112
Charles W. Goodyear	1615 Poydras St., New Orleans, LA 70112
Rene' L. Latiolais	1615 Poydras St., New Orleans, LA 70112

Officers:

<u>Title</u>	<u>Individual</u>	<u>Business Address</u>
Chairman of the Board and President	Rene' L. Latiolais	1615 Poydras St., New Orleans, LA 70112
Vice President	R. J. Becnel	1615 Poydras St., New Orleans, LA 70112
Vice President	J. Ronald Combs	1615 Poydras St., New Orleans, LA 70112
Treasurer	R. Foster Duncan	1615 Poydras St., New Orleans, LA 70112
Asst. Vice President	David G. Bird	P. O. Box 265, Grand Cayman, BWI
Asst. Vice President	Theodore P. Fowler	1615 Poydras St., New Orleans, LA 70112
Asst. Vice President	Gary L. Pigg	1615 Poydras St., New Orleans, LA 70112
Asst. Vice President	David S. Sargison	P. O. Box 265, Grand Cayman, BWI
Asst. Vice President	R. S. Shean	1615 Poydras St., New Orleans, LA 70112
Asst. Vice President	William S. Walker	P. O. Box 265, Grand Cayman, BWI
Secretary	Michael C. Kilanowski, Jr.	1615 Poydras St., New Orleans, LA 70112