

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

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90092 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P29516

1. Corporation Name
INSILCO CORPORATION

Principal Place of Business
**425 METRO PLACE NORTH
 STE. 555
 DUBLIN OH 43017**

Mailing Address
**425 METRO PLACE NORTH
 STE. 555
 DUBLIN OH 43017**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/25/1990

4. FEI Number **06-0635844** 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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD SMIALEK, ROBERT L	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	425 METRO PLACE NORTH, STE 555	1.2 NAME	
STREET ADDRESS	DUBLIN OH 43017	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	AT SMITH, STEPHEN J	2.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	425 METRO PL NO STE 555	2.2 NAME	
STREET ADDRESS	DUBLIN OH 43017	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	AGCS ARONOWITZ, DAVID M	3.1 TITLE	V.P. & CFO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	425 METRO PLACE NORTH, STE 555	3.2 NAME	Kauer, David A.
STREET ADDRESS	DUBLIN OH 43017	3.3 STREET ADDRESS	425 Metro Place North, Ste. 555
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Dublin, OH 43017
TITLE	TM STEWART, FRED L	4.1 TITLE	Director of Tax <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	425 METRO PL N STE 555	4.2 NAME	
STREET ADDRESS	DUBLIN OH 43017	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	V JACOBS, LES G.	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	425 METRO PLACE NORTH, STE 555	5.2 NAME	
STREET ADDRESS	DUBLIN GA 43017	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	VP WOODLIEF, PHILIP K	6.1 TITLE	V.P. & Corporate Controller <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	425 METRO PL NO STE 555	6.2 NAME	Elia, Michael R.
STREET ADDRESS	DUBLIN OH	6.3 STREET ADDRESS	425 Metro Place North, Ste. 555
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Dublin, OH 43017

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, with all other like empowered.

SIGNATURE: *Fred L. Stewart* **Fred L. Stewart** Date: **3/29/99** Daytime Phone #: **(614)792-0468**

CR2E034 (1/98)