

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

DOCUMENT # 287814 (8)

1. Corporation Name
SECURITIES MANAGEMENT AND RESEARCH INC



Principal Place of Business: ONE MOODY PLAZA, 14 FL, GALVESTON TEXAS 77550, US
Mailing Address: ONE MOODY PLAZA, 14 FL, GALVESTON TEXAS 77550, US

3. Date Incorporated or Qualified: 12/07/1964
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-1145041
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

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

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; 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: _____ DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	UNGER, EMERSON V.	
STREET ADDRESS	ONE MOODY PLAZA	
CITY-ST-ZIP	GAVELSTON TX	
TITLE	S	<input type="checkbox"/> DELETE
NAME	AXELSON, TERESA	
STREET ADDRESS	ONE MOODY PLAZA	
CITY-ST-ZIP	GAVELSTON TX	
TITLE	VT	<input type="checkbox"/> DELETE
NAME	KOELEMAY, BRENDA T	
STREET ADDRESS	ONE MOODY PLAZA	
CITY-ST-ZIP	GAVELSTON TX	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CLAY, ORSON C.	
STREET ADDRESS	ONE MOODY PLAZA	
CITY-ST-ZIP	GALVESTON TX	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MCCRSKEY, MICHAEL W	
STREET ADDRESS	ONE MOODY PLAZA	
CITY-ST-ZIP	GAVELSTON TX	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP/Chief Investment Officer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	GORDON D. DIXON	
1.3 STREET ADDRESS	ONE MOODY PLAZA	
1.4 CITY-ST-ZIP	GALVESTON TX 77550	
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		

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5.1

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: *Brenda T. Koelmay*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 (409)7632767
DATE DESTROYED

CR2E034 (12/95)