

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

FILED
May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000003872 (8)

1. Corporation Name
STRUCTURED SECURITY COMPANY, INC.



Principal Place of Business 777 SAN MARIN DR. % CORP SECRETARY'S OFFICE NOVATO CA 94998 US	Mailing Address 777 SAN MARIN DR. % CORP SECRETARY'S OFFICE NOVATO CA 94998-0001 US
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3. Date Incorporated or Qualified 07/25/1994	3a. Date of Last Report 05/01/1996
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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

4. FEI Number 13-2642442	Applied For <input type="checkbox"/> 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**DUDLEY, MICHAEL E
 % FIREMAN'S FUND INSURANCE COMPANY
 5310 CYPRESS CENTER DRIVE
 TAMPA FL 33609**

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSMEYER, HERBERT F	1.2 NAME	
STREET ADDRESS	777 SAN MARIN DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	NOVATO CA 94998	1.4 CITY - ST - ZIP	
TITLE	PCEO <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STINNETTE, JOE L JR.	2.2 NAME	
STREET ADDRESS	777 SAN MARIN DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	NOVATO CA 94998	2.4 CITY - ST - ZIP	
TITLE	DCFO <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POST, JEFFREY H	3.2 NAME	
STREET ADDRESS	777 SAN MARIN DR.	3.3 STREET ADDRESS	
CITY - ST - ZIP	NOVATO CA 94998	3.4 CITY - ST - ZIP	
TITLE	VT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARSH, HAROLD N III	4.2 NAME	
STREET ADDRESS	777 SAN MARIN DR.	4.3 STREET ADDRESS	
CITY - ST - ZIP	NOVATO CA 94998	4.4 CITY - ST - ZIP	
TITLE	VS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWANSON, THOMAS A	5.2 NAME	
STREET ADDRESS	777 SAN MARIN DR.	5.3 STREET ADDRESS	
CITY - ST - ZIP	NOVATO CA 94998	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: **Jeannette Y. Wong, Asst. Secretary** **4/24/97** (415) 899-2000
 Date Daytime Phone #

CR2E034 (9/96)

STRUCTURED SECURITY COMPANY, INC.
(Subsidiary of Fireman's Fund Insurance Company)
(formerly known as International Holding Corporation)

PURPOSE: To engage in the business of structured settlements.

DIRECTORS
(Authorized No. 3)

Herbert F. Hansmeyer
Jeffrey H. Post

Joe L. Stinnette, Jr.

ELECTED OFFICERS

Herbert F. Hansmeyer
Joe L. Stinnette, Jr.

Chairman of the Board
President and Chief Executive
Officer

Jeffrey H. Post

Executive Vice President and
Chief Financial Officer

Harold N. Marsh, III

Senior Vice President and
Treasurer

Thomas A. Swanson

Senior Vice President, General
Counsel and Corporate Secretary

APPOINTED OFFICERS

Jeannette Y. Wong

Assistant Secretary

Business address:

All of the above are located at 777 San Marin Drive, Novato,
California, 94998.

Home office address:

32 Loockerman Sq., Suite L-100,
Dover DE 19901