

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 # **K21363 (2)**

1. Corporation Name

FIDUCIARY TRUST INTERNATIONAL OF THE SOUTH



Principal Place of Business

Mailing Address

100 S.E. 2ND STREET
STE 2300
MIAMI FL 33131-1101
US

100 S.E. 2ND STREET
STE 2300
MIAMI FL 33131-1101
US

3. Date Incorporated or Qualified 10/27/1988	3a. Date of Last Report 01/20/1995
4. FEI Number 65-0080824	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" 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	

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81. Name	Susan Strickroot Adams
82. Street Address (P.O. Box Number is Not Acceptable)	100 S.E. 2nd Street
83.	Suite 2300
84. City	Miami
85. State	FL
Zip Code	33131-1101

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: *Susan Strickroot Adams*

(NOTE: Registered Agent signature required when reappointing)

DATE: **1/16/96**

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: ATKINS, J. MURREY, JR.	1.2 NAME
STREET ADDRESS: P.O. BOX 1012	1.3 STREET ADDRESS
CITY-STATE-ZIP: CHARLOTTE NC	1.4 CITY-STATE-ZIP
TITLE: D	2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: O'CONNELL, DANIEL K	2.2 NAME
STREET ADDRESS: 5133 N.W. 93RD DORAL WAY	2.3 STREET ADDRESS
CITY-STATE-ZIP: MIAMI FL	2.4 CITY-STATE-ZIP
TITLE: C	3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: HUNTINGTON, LAWRENCE S	3.2 NAME
STREET ADDRESS: TWO WORLD TRADE CENTER	3.3 STREET ADDRESS
CITY-STATE-ZIP: NEW YORK NY	3.4 CITY-STATE-ZIP
TITLE: D	4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: STRICKROOT, JOHN C	4.2 NAME
STREET ADDRESS: 100 S.E. 2ND STREET STE 1700	4.3 STREET ADDRESS
CITY-STATE-ZIP: MIAMI FL	4.4 CITY-STATE-ZIP
TITLE: DP	5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: HOUGHTON, PETER E.	5.2 NAME
STREET ADDRESS: 100 S.E. 2ND STREET, STE 2300	5.3 STREET ADDRESS
CITY-STATE-ZIP: MIAMI FL	5.4 CITY-STATE-ZIP
TITLE: D	6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: ZARMATI, MAURICE M.	6.2 NAME
STREET ADDRESS: 3655 N.W. 87TH AVE	6.3 STREET ADDRESS
CITY-STATE-ZIP: MIAMI FL	6.4 CITY-STATE-ZIP

14. I 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: **1-16-96** DAYTIME PHONE #: **305 572-1260**

CR2E034 (12/95)

FIDUCIARY TRUST INTERNATIONAL OF THE SOUTH
ADDITIONAL OFFICERS/DIRECTORS
1996

D
Deane, James R..
Two World Trade Center
New York, NY

D
Herron, James M.
3600 N.W. 82nd Avenue
Miami, FL

D/o
Rivera, Mario
1 S.E. 2nd Street
Suite 2300
Miami, FL

D
Giresi, Mark A.
17777 Old Cutler Road
Miami, FL

D
Randall, B. Carter
255 S. Orange Avenue
Suite 1510
Orlando, FL

D
Swenson, Edward F., Jr.
2699 South Bayshore Drive
Miami, FL

D Addition
Maria Elena Ibanez
12285 S.W. 129th Court
Miami, FL