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May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L08438 (8)
1. Corporation Name
UNITED PACIFIC STRUCTURED SETTLEMENT COMPANY



Principal Place of Business: 601 UNION ST., STE 5600 SEATTLE WA 98101-2336 US
Mailing Address: P.O. BOX 490 SEATTLE WA 98111-0490 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 08/11/1989	3a. Date of Last Report 05/01/1996
21. Suite, Apt. #, etc.	26. Suite, Apt #, etc.	4. FEI Number 23-2571375	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip Country	28. Zip Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Zip	25. Country	29. Zip	30. Country
8. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

8. 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
FL

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: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PCD	<input checked="" type="checkbox"/> DELETE
NAME	WELCH, PATRICK E	
STREET ADDRESS	601 UNION ST, STE 5600	
CITY-ST-ZIP	SEATTLE WA 98101-2336	
TITLE	SVCD	<input type="checkbox"/> DELETE
NAME	STIFF, GEOFFREY S	
STREET ADDRESS	601 UNION STREET, SUITE 5600	
CITY-ST-ZIP	SEATTLE WA 98101-2336	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HUGUNIN, JEFFREY I.	
STREET ADDRESS	601 UNION STREET, SUITE 5600	
CITY-ST-ZIP	SETTLE WA 2336	
TITLE	VC	<input type="checkbox"/> DELETE
NAME	CASEY, THOMAS W.	
STREET ADDRESS	601 UNION STREET, SUITE 5600	
CITY-ST-ZIP	SEATTLE WA 98101-2336	
TITLE	SVD	<input type="checkbox"/> DELETE
NAME	MOSES, VICTOR C	
STREET ADDRESS	601 UNION STREET, SUITE 5600	
CITY-ST-ZIP	SEATTLE WA 98101-2336	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	BODMER, JULIE M	
STREET ADDRESS	601 UNION ST, STE 5600	
CITY-ST-ZIP	SEATTLE WA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	V.P.S. Attey, John W.
1.3 STREET ADDRESS	601 UNION STREET, SUITE 5600
1.4 CITY-ST-ZIP	SEATTLE, WA 98101
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	D.P. Stiff, Geoffrey S.
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	V.C.F.O Casey, Thomas W
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	

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: *[Handwritten Signature]* 4-28-97 2010 625-1755

CR2E034 (9/96)