

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 # **P94000008423 (3)**

1. Corporation Name
THE JEFFERSON NATIONAL MANAGEMENT COMPANY



Principal Place of Business 1031 W.MORSE BLVD 270 WINTER PARK FL 32789 US		Mailing Address 1031 W.MORSE BLVD 270 WINTER PARK FL 32789 US		3. Date Incorporated or Qualified 02/01/1994	3a. Date of Last Report 04/21/1995
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2. Principal Place of Business 21 Suite 140	2a. Mailing Address 26 Suite 140	4. FEI Number 59-3221147	Applied For <input type="checkbox"/> Not Applicable
22 1031 W. Morse Blvd.	27 1031 W. Morse Blvd.	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
23 Winter Park, FL	28 Winter Park, FL	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24 32789 25 USA	29 32789 30 USA		

9. Name and Address of Current Registered Agent SWANN, HADLEY D 1031 W.MORSE BLVD 270 WINTER PARK FL 32789				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 _____ DATE _____
Signature (Typed or printed name of registered agent and the date of signature) (Date) (Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCAULIFFE, TERENCE R	1.2 NAME	
STREET ADDRESS	1341 G STREET, N.W. SUITE 200	1.3 STREET ADDRESS	
CITY- ST- ZIP	WASHINGTON D.	1.4 CITY- ST- ZIP	
TITLE	DST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCAULIFFE, DOROTHY S	2.2 NAME	
STREET ADDRESS	1341 G STREET N.W., STE. 200	2.3 STREET ADDRESS	
CITY- ST- ZIP	WASHINGTON DC	2.4 CITY- ST- ZIP	
TITLE	VP	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWANN, CHRISTIAN M.	3.2 NAME	
STREET ADDRESS	1031 W.MORSE BLVD, SUITE 270	3.3 STREET ADDRESS	
CITY- ST- ZIP	WINTER PARK FL	3.4 CITY- ST- ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		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 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 registered agent, and that I am prepared 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 to this report.

SIGNATURE: *Terence R McAuliffe* 2-23-96 202-783-3153
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)