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Sep 12 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 # 500149 (0)
 1. Corporation Name
PUBLIC EMPLOYEES EQUITIES SERVICES COMPANY



Principal Place of Business 1220 E. PARK AVENUE TALLAHASSEE FL 32301	Mailing Address P.O. BOX 1600 TALLAHASSEE FL 32302-1600
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/31/1976	3a. Date of Last Report 04/29/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-1657256		Applied For Not Applicable	
22 City & State	27 City & State	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	
23 Zip	28 Country	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
24 Zip	25 Country	29 Zip		30 Country	

9. Name and Address of Current Registered Agent BISCHOFF, WILLIAM S. 1720 SOUTH GADSDEN ST. TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent	
81 Name James W. Geiger		82 Street Address (P.O. Box Number is Not Acceptable) 1220 E. Park Avenue	
83 City Tallahassee, FL		84 Zip Code 32301	

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 **James W. Geiger, President** (NOTE: Registered Agent signature required when instituting) **James W. Geiger 9/5/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEIGER, JAMES W 1220 EAST PARK AVENUE TALLAHASSEE FL 32301	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	CEO Edward J. Baum 17713 S.E. Federal Highway # 100 Teguesta, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD TORNILLO, PAT L 118 NORTH MONROE ST. TALLAHASSEE FL 32301	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VP Sales
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD PRASLICK, GAIL F ONE MADISON AVE NEW YORK NY 10010	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHEITLIN, ALEXANDER G ONE MADISON AVE NEW YORK NY 10010	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MANDEL, RICHARD R G ONE MADISON AVE NEW YORK NY 10010	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, ROBERT F 118 NORTH MONROE ST. TALLAHASSEE FL 32301	6.1 TITLE 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: **James W. Geiger, President** (850) 425-5252 **James W. Geiger 9/5/97**

CR2E034 (9/96)