

FILE NOW: FILING FEE AFTER MAY 1ST IS \$60.00

FILED  
Mar 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mooreham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 540443 (9)  
1. Corporation Name  
SOCIAL ISSUES RESOURCES SERIES, INC.

Principal Place of Business  
1100 HOLLAND DRIVE  
BOCA RATON FL 33487

Mailing Address  
1100 HOLLAND DRIVE  
BOCA RATON FL 33487



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/08/1977	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 52-0984180		Applied For Not Applicable	
22. City & State	27. City & State	6. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

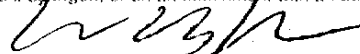
9. Name and Address of Current Registered Agent GOLDSTEIN, ELEANOR C. 1100 HOLLAND DRIVE BOCA RATON FL 33487		10. Name and Address of New Registered Agent	
81. Name			
82. Street Address (P.O. Box Number is Not Acceptable)			
83.			
84. City		85. Zip Code FL	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDSTEIN, ELLIOT H.	1.2 NAME	
STREET ADDRESS	1100 HOLLAND DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 00000	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDSTEIN, SETH	2.2 NAME	
STREET ADDRESS	1100 HOLLAND DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 00000	2.4 CITY-ST-ZIP	
TITLE	VSTD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDSTEIN, ELEANOR P.	3.2 NAME	
STREET ADDRESS	1100 HOLLAND DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 00000	3.4 CITY-ST-ZIP	
TITLE	ASTV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCBRIDE, GERALDINE	4.2 NAME	
STREET ADDRESS	22795 S.W. 68TH AVE., UNIT 103	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	
TITLE	AV	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES, DANIEL	5.2 NAME	
STREET ADDRESS	LOT 31 RFD ROCK RD.,	5.3 STREET ADDRESS	
CITY-ST-ZIP	BLANCO TX	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, W. RODGERS	6.2 NAME	
STREET ADDRESS	7623 SIERRA TERR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	6.4 CITY-ST-ZIP	

14. I 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:  W. Rodgers name 2/3/98 561-394-7944

CR2E034 (10/97)