

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 23 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 # **822712** (6)
1. Corporation Name
MARSH & MCLENNAN SECURITIES CORPORATION

Principal Place of Business 1255 23RD STREET, N.W. WASHINGTON DC 20037 US	Mailing Address 1166 AVE. OF THE AMERICAS-31 FL. NEW YORK NY 10036-2708 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/30/1969	3a. Date of Last Report 04/16/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 36-2666422		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	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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MERCIER, CLAUDE	1.2 NAME	
STREET ADDRESS	1166 AVE. OF THE AMERICAS	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	1.4 CITY-ST-ZIP	
TITLE	EVD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVELL, STEPHEN S.	2.2 NAME	
STREET ADDRESS	1166 AVE OF THE AMERICAS	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	2.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOHM, JOHN R	3.2 NAME	
STREET ADDRESS	1255 23RD STREET N.W.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WASHINGTON D.	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FAGAN, WILLIAM	4.2 NAME	
STREET ADDRESS	1166 AVE. OF THE AMERICAS	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 00000	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHLINGBUAM, JEFF	5.2 NAME	
STREET ADDRESS	1166 AVE. OF THE AMERICAS	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	5.4 CITY-ST-ZIP	
TITLE	S <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROMANOV, VICTOR	6.2 NAME	MARGARET O'BRIEN
STREET ADDRESS	1166 AVE. OF THE AMERICAS	6.3 STREET ADDRESS	1166 Ave. of the Americas
CITY-ST-ZIP	NEW YORK NY	6.4 CITY-ST-ZIP	NY NY 10036

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: *Jeff Schlingbaum* 4/18/97 3:11 PM

CR2E034 (9/96)