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Mar 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 # 822767 (0)
1. Corporation Name
CNA INVESTOR SERVICES, INC.



Principal Place of Business CNA PLAZA 25 SO 34 SOUTH CHICAGO ILLINOIS 60685 US	Mailing Address CNA PLAZA 25 SO 34 SOUTH CHICAGO ILLINOIS 60610-2310 US
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3. Date Incorporated or Qualified 05/09/1969	3a. Date of Last Report 04/09/1996
4. FEI Number 36-2639574	Applied For Not Applicable
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21. CNA PLAZA Suite, Apt. #, etc. 22. 34 SOUTH City & State 23. Zip Country	2a. Mailing Address 26. CNA PLAZA Suite, Apt. #, etc. 27. 34 SOUTH City & State 28. Zip Country
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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	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	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 _____ (Type name, title, and address of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD PETTORINI, JAMES G 551 OAKDALE AVE GLENCOE IL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SV LOWRY, DONALD M 79 MARK DR. HAWTHORN WOODS IL	1.2 NAME	
STREET ADDRESS	VD MATEJA, GLENN ARTHUR 720 61ST ST DOWNERS GROVE IL	1.3 STREET ADDRESS	
CITY-STATE-ZIP	AG KURTZ, WILLIAM A 433 NORTH DOVER AVENUE LAGRANGE IL	1.4 CITY-STATE-ZIP	
TITLE	VD CHAPON, RONALD S 732 MILLWOOD ST CARY IL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P HOGAN, KEVIN M 2098 BUCKLEY COURT NAPERVILLE IL	2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-STATE-ZIP		2.4 CITY-STATE-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-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 included 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:  RONALD CHAPON 2-28-97 312-822-7592
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**CNA Investor Services Inc. Officer & Director Listing
as of May 1996**

Name	Social Security No. & Date of Birth	Title & Affiliation Date	Home Address	Business Address
James G. Pettorini	041-34-8434 DOB 04/18/43	Chairman of the Board & Director Effective 12/94	551 Oakdale Avenue Glencoe, IL 60022	CNA Plaza Chicago IL 60685
Kevin M Hogan	350-48-0834 DOB 05/23/54	Pres, Chief Officer, Treas, & Director Effective 9/94	2098 Buckley Court Naperville IL 60565	CNA Plaza Chicago IL 60685
Glenn A. Marcja	326-34-8795 DOB 10/26/42	Vice President & Director Effective 4/86	720 61st Street Downers Grove IL 60516	CNA Plaza Chicago IL 60685
William A. Kurtz	356-20-0218 DOB 09/08/27	Assistant General Counsel Effective 7/72	433 North Dover Ave LaGrange IL 60626	CNA Plaza Chicago IL 60685
Ronald S. Chapon	325-36-6295 DOB 01/11/45	Vice-President & Director Effective 4/84	732 Millwood Street Cary, IL 60013	CNA Plaza Chicago IL 60685
Alan S. Lurry	277-66-8334 DOB 12/08/59	Vice President & Director Effective 4/96	6801 Colonel Holcomb Drive Crystal Lake IL 60012	CNA Plaza Chicago IL 60685
Lynne Gugenheim	459-76-8899 DOB 1/25/60	Assistant Secretary Effective 4/96	2500 N Lakeview -- Apt 2301 Chicago IL 60614	CNA Plaza Chicago IL 60685

**CNA Investor Services Inc. Officer & Director Listing
as of May 1996**

Name	Social Security No. & Date of Birth	Title & Affiliation Date	Home Address	Business Address
Donald M. Lowry	388-24-2017	Vice President, General Counsel & Director Effective: 6/88 Corp Secretary Effective 7/92	79 Mark Drive Hawthorn Woods IL 60047	CNA Plaza Chicago IL 60685
John J. Sullivan	DOB 10/20/29 325-36-6246 DOB 07/17/44	Vice President & Director Effective 4/92	14831 S. 88th Ave Orland Pk IL 60462	CNA Plaza Chicago IL 60685