

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

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**May 05 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Morham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 838458 (8)**  
1. Corporation Name  
**MARSHALL AND STEVENS INCORPORATED**



Principal Place of Business: **707 WILSHIRE BLVD 5200 LOS ANGELES CA 90017 US**  
Mailing Address: **707 WILSHIRE BLVD 5200 LOS ANGELES CA 90017-3614 US**

3. Date Incorporated or Qualified: **05/19/1977**  
3a. Date of Last Report: **05/01/1996**  
4. FEI Number: **36-2919252**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: **707 WILSHIRE BLVD**  
2a. Mailing Address: **707 WILSHIRE BLVD**  
22. Suite, Apt. #, etc.: **5200**  
27. Suite, Apt. #, etc.: **5200**  
23. City & State: **Los Angeles CA**  
28. City & State: **Los Angeles CA**  
24. Zip: **90017** 25. Country: **U.S.A.**  
29. Zip: **90017** 30. Country: **U.S.A.**

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VTS SANTARSIERO, M.W. 707 WILSHIRE BLVD 5200 LOS ANGELES CA	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD ATKINS, MERLE 1700 MARKET STR #1510 PHILADELPHIA PA	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V VISCANTI, LOU 200 NO BROADWAY STE 1600 ST LOUIS MO	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	PD KERSLAKE, R 707 WILSHIRE BLVD SUITE 5200 LOS ANGELES CA	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	VPD THOMAS, FRED 707 WILSHIRE BLVD 5200 LOS ANGELES CA	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	<input type="checkbox"/> DELETE	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 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: \_\_\_\_\_

CR2E034 (9/96)