

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F93000004745 (6)

1. Corporation Name

PLM FINANCIAL SERVICES, INC.



Principal Place of Business

Mailing Address

ONE MARKET PLAZA
STEUART STREET TOWER, SUITE 900
SAN FRANCISCO CA 94105

ONE MARKET PLAZA
STEUART STREET TOWER, SUITE 900
SAN FRANCISCO CA 94105

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

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30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
10/20/1993

3a. Date of Last Report
02/14/1995

4. FEI Number
94-2989348

Applied For
Not Applicable

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

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME HIRSCH, ALLEN V
STREET ADDRESS 1 MARKET PLAZA, STEUART ST. TOWER, #900
CITY-ST-ZIP SAN FRANCISCO CA 94105

DELETE

TITLE VCFO
NAME ALLGOOD, J M
STREET ADDRESS 1 MARKET PLAZA, STEUART ST. TOWER, #900
CITY-ST-ZIP SAN FRANCISCO CA 94105

DELETE

TITLE VT
NAME DAVIS, DAVID J
STREET ADDRESS 1 MARKET PLAZA, STEUART ST. TOWER, #900
CITY-ST-ZIP SAN FRANCISCO CA

DELETE

TITLE VS
NAME PEARY, STEPHEN
STREET ADDRESS 1 MARKET PLAZA, STEUART ST. TOWER, #900
CITY-ST-ZIP SAN FRANCISCO CA 94105

DELETE

TITLE AS
NAME SCHWERIN, LORRAINE
STREET ADDRESS 1 MARKET PLAZA, STEUART ST. TOWER, #900
CITY-ST-ZIP SAN FRANCISCO CA 94105

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Lorraine Schwerin

Lorraine Schwerin, Assistant Secretary

Douglas P. Goodrich
1 Market Plaza, Steuart St. Tower, #900
San Francisco, CA 94105

5/7/96 415/905-7360

Date

Daytime Phone #

CR2E034 (12/95)