

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

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000000983 (5)**

1. Corporation Name
CSW MANAGEMENT SERVICES, INC.

Principal Place of Business
**2010 NORTH LOOP WEST, SUITE 210
HOUSTON TX 77018**

Mailing Address
**ONE EAST FOURTH STREET
8TH FLOOR
CINCINNATI OH 45202**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/01/1995	
21 440 Mt. Rushmore Road		26		4. FEI Number 76-0148645	Applied For <input type="checkbox"/> Not Applicable
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 City & State Rapid City, SD		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip 57701	25 Country US	29 Zip	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH 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

Signature, typed or printed name 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	DC TATE, JEFFREY S	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	250 EAST FIFTH STREET	1.2 NAME	
STREET ADDRESS	CINCINNATI OH 45202	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DVAS MUETHING, MARK F	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	250 EAST FIFTH STREET	2.2 NAME	
STREET ADDRESS	CINCINNATI OH 45202	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	T MANEY, WILLIAM J	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	250 EAST FIFTH STREET	3.2 NAME	
STREET ADDRESS	CINCINNATI OH 45202	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	S GAYNOR, WILLIAM T JR	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	440 MT. RUSHMORE ROAD	4.2 NAME	
STREET ADDRESS	RAPID CITY SD 57701	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	PD STREETMAN, JOHN A	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1201 ROBERTS BLVD	5.2 NAME	
STREET ADDRESS	KENNESAW GA	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	30144
TITLE	VC STREETMAN, JOHN A	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1225 ROBERTS BLVD., SUITE 208	6.2 NAME	
STREET ADDRESS	KENNESAW GA 30144	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	CINCINNATI OH 45202

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, on an attachment with an address.

SIGNATURE:



Thomas E. Mischell
Assistant Treasurer

4/20/98

(513) 579-2171

CR2E034 (1097)