

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

FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # F95000002074 (1)
 1. Corporation Name
DOCUMENT SOLUTIONS, INC.



Principal Place of Business 255 RIVERCHASE PARKWAY SUITE L BIRMINGHAM AL 35244	Mailing Address CORP FINANCE TAX DEPT 3435 STELZER RD. COLUMBUS OH 43219-6026
--	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/28/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1734252	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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input 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

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 fee, if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANGUM, LYNN J	1.2 NAME	
STREET ADDRESS	150 CLOVE ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	LITTLE FALLS NJ 07424	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOURKE, PAUL	2.2 NAME	
STREET ADDRESS	1 GREENWAY PLAZA	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77046	2.4 CITY-ST-ZIP	
TITLE	P	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIBLEY, MICHAEL	3.2 NAME	
STREET ADDRESS	255 RIVERCHASE PARKWAY E	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRIMMINGHAM AL 32544	3.4 CITY-ST-ZIP	
TITLE	VPCS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELL, KEVIN J	4.2 NAME	
STREET ADDRESS	150 CLOVE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	LITTLE FALLS NJ 07424	4.4 CITY-ST-ZIP	
TITLE	EVCT	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCMULLAN, ROBERT J	5.2 NAME	
STREET ADDRESS	150 CLOVE RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	LITTLE FALLS NJ 07424	5.4 CITY-ST-ZIP	
TITLE	SVP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RYBARCZYK, MARK	6.2 NAME	
STREET ADDRESS	11 GREENWAY PLAZA	6.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77046	6.4 CITY-ST-ZIP	

For additional Officers See attached List.

**PRESIDENT
 TEDD WILSON
 255 RIVERCHASE PARKWAY E.
 BIRMINGHAM, AL 32544**

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, or in an attachment with an address.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: **2/2/98** Daytime Phone #: **473 812 8600**

CR2E034 (10/97)

DOCUMENT SOLUTIONS INC.

Corporate Officers & Directors

Position	Name	Business Address
Chairman/CEO	Lynn J. Mangum	150 Clove Rd., Little Falls, NJ 07424
Vice Chairman	Paul Bourke	11 Greenway Plaza, Houston, TX 77046
President	Michael Sibley	
VIP/ Gen Council/Secretary	Tedd Kilson Kevin J. Dell	255 Riverchase Parkway E, Birmingham AL35244 150 Clove Rd., Little Falls, NJ 07424
Executive Vice Pres./CFO/ Treasurer	Robert J. McMullan	150 Clove Rd., Little Falls, NJ 07424
Senior Vice President	Mark Rybarczyk	11 Greenway Plaza, Houston, TX 77046
Senior Vice President	Dennis Sheehan	150 Clove Rd., Little Falls, NJ 07424
Vice President	Steven Tripp	255 Riverchase Parkway E, Birmingham AL35244
Assistance Secretary	Annamaria Porcaro	150 Clove Rd., Little Falls, NJ 07424