

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Feb 12 1998 8:00 am
Secretary of State

DOCUMENT # F96000000139 (3)

1. Corporation Name

DRIEHAUS CAPITAL MANAGEMENT, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
NAPLES EXECUTIVE SUITES. #103 5100 N. TAMiami TRAIL NAPLES FL 33963		NAPLES EXECUTIVE SUITES. #103 5100 N. TAMiami TRAIL NAPLES FL 33963	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
25		30	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	V/S
NAME	DRIEHAUS, RICHARD H	1.2 NAME	WEISS, MARY H.
STREET ADDRESS	25 E. ERIE ST.	1.3 STREET ADDRESS	25 EAST ERIE ST.
CITY-ST-ZIP	CHICAGO IL 00611	1.4 CITY-ST-ZIP	CHICAGO, IL 60611
TITLE	V	2.1 TITLE	V
NAME	ANDERSEN, WILLIAM R	2.2 NAME	WALLACE, DIANE L.
STREET ADDRESS	25 E. ERIE ST.	2.3 STREET ADDRESS	25 EAST ERIE ST.
CITY-ST-ZIP	CHICAGO IL	2.4 CITY-ST-ZIP	CHICAGO, IL 60611
TITLE	V	3.1 TITLE	P
NAME	GENOVISE, MARK P	3.2 NAME	MOYER, ROBERT F.
STREET ADDRESS	25 E. ERIE ST.	3.3 STREET ADDRESS	25 EAST ERIE ST.
CITY-ST-ZIP	CHICAGO IL 00611	3.4 CITY-ST-ZIP	CHICAGO, IL 60611
TITLE	V	4.1 TITLE	V
NAME	WEISS, MARY H	4.2 NAME	KYNE, M. BRENDAN
STREET ADDRESS	25 E. ERIE ST.	4.3 STREET ADDRESS	25 EAST ERIE ST.
CITY-ST-ZIP	CHICAGO IL	4.4 CITY-ST-ZIP	CHICAGO, IL 60611
TITLE	VT	5.1 TITLE	V
NAME	WALLACE, DIANE L	5.2 NAME	HARAHAN, MEIGHAN
STREET ADDRESS	25 E. ERIE ST.	5.3 STREET ADDRESS	25 EAST ERIE ST.
CITY-ST-ZIP	CHICAGO IL 00611	5.4 CITY-ST-ZIP	CHICAGO, IL 60611
TITLE	VT	6.1 TITLE	V
NAME	CULAFIC, DUSKO	6.2 NAME	THOMAS, MARGARET
STREET ADDRESS	25 E. ERIE ST.	6.3 STREET ADDRESS	25 EAST ERIE ST.
CITY-ST-ZIP	CHICAGO IL	6.4 CITY-ST-ZIP	CHICAGO, IL 60611

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 on an attachment with an address.

SIGNATURE

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

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

CR2E034 (10/97)