



File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 APR 27 PM 5:00 SECRETARY OF STATE DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M98000000308 THE CAPITAL COMPANY OF AMERICA CLIENT SERVICES LLC 600 EAST LAS COLINAS BLVD., SUITE 1300 IRVING TX 75039		1a. Principal Place of Business Address 600 EAST LAS COLINAS BLVD., IRVING TX 75039			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		2a. Mailing Address Suite, Apt. #, etc. City & State Zip		3. Date Organized or Qualified 03/31/1998 3a. State of Formation DE 4. FEI Number 13-3648580 5. Date of Last Report 6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____ DATE _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when re-instating)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	HAMBLEY, ANN	600 EAST LAS COLINAS BLVD.		IRVING TX	
MGR	FELLOWS, BOYD	2 WORLD FINANCIAL CENTER		NEW YORK NY	
MGR	MCCAULEY, MARK	2 WORLD FINANCIAL CENTER		NEW YORK NY	
MGR	SCAVONE, FRANK	2 WORLD FINANCIAL CENTER		NEW YORK NY	
MGR	CORTON, KATHY	2 WORLD FINANCIAL CENTER		NEW YORK NY	
MGR	PILCHER, BRIAN	2 WORLD FINANCIAL CENTER		NEW YORK NY	
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: 		3/17/99 972-401-8500			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER					