

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

FILED
Jun 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P 29416

1. Corporation Name

VISTA FUND DISTRIBUTORS, INC.

Principal Place of Business	Mailing Address
3435 STELZER ROAD COLUMBUS, OH 43219-8026	CORP FINANCE TAX DEPT 3435 STELZER RD COLUMBUS OH 43219-8026

3. Date Incorporated or Qualified	3a. Date of Last Report
05/18/90	06/03/96

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	13-3565208	Not Applicable
22 City & State	27 City & State	6. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORP SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number Is Not Acceptable)	
83	
84 City	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	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	SEE ATTACHED LIST
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	800002209638
CITY - ST - ZIP		3.4 CITY - ST - ZIP	-06/12/97--01002--009
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	***550.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *John P. Sullivan VP*

5-27-97 614 470-8306

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

VISTA FUND DISTRIBUTORS INC.**Corporate Officers & Directors**

		Business Address	
Position	Name		
Chairman/CEO	Lynn J. Mangum	150 Clove Rd., Little Falls, NJ 07424	
President	J David Huber	3435 Stelzer Rd. Columbus, Ohio 43219	
Vice president/Secretary	Kevin J. Dell	150 Clove Rd., Little Falls, NJ 07424	
Executive VP/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	Anthony Turner	125 West 55th Street, 11th Floor, New York, NY 10019	
Senior Vice President	Lee Schultheis	101 Park Ave, 16th Floor, New York, NY 10016	
Senior Vice President	Dennis Sheehan	150 Clove Rd., Little Falls, NJ 07424	
Vice President	David Carson	101 Park Ave, 16th Floor, New York, NY 10016	
Vice President	Dale W. Smith	3435 Stelzer Rd. Columbus, Ohio 43219	
Vice President	Michael Burns	3435 Stelzer Rd. Columbus, Ohio 43219	
Vice President	John Gilliam	3435 Stelzer Rd. Columbus, Ohio 43219	
Assistant Secretary	Annamaria Porcaro	150 Clove Rd., Little Falls, NJ 07424	
Assistant Secretary	Robert Tuch	3435 Stelzer Rd. Columbus, Ohio 43219	

05/28/97

10:48 AM

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