

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
May 28 1997 8:00am  
Secretary of State

DOCUMENT # **P36602** (1)  
1. Corporation Name  
**LIDLAW HOLDINGS ASSET MANAGEMENT, INC.**

Principal Place of Business  
**100 PARK AVE.  
NEW YORK NY 10017**

Mailing Address  
**100 PARK AVE.  
NEW YORK NY 10017-5516**



3. Date Incorporated or Qualified **12/06/1991** 3a. Date of Last Report **06/17/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number <b>13-3472589</b>		Applied For Not Applicable	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
23 Zip		28 Zip		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Country		25 Country		29 Country		30 Country	

9. Name and Address of Current Registered Agent <b>GUERSANI-HARRINGTON, CARLOS 1221 BRICKELL AVENUE MIAMI FL 33131</b>				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 <b>FL</b>			

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<b>D</b>
NAME	<b>BALEY, PAUL</b>	1.2 NAME	<b>STEPHEN KENNARD</b>
STREET ADDRESS	<b>100 PARK AVENUE</b>	1.3 STREET ADDRESS	<b>100 Park Avenue</b>
CITY - ST - ZIP	<b>NEW YORK NY</b>	1.4 CITY - ST - ZIP	<b>New York, NY 10017</b>
TITLE	<b>PDS</b>	2.1 TITLE	
NAME	<b>BOTTOMS, DAVID N., JR.</b>	2.2 NAME	
STREET ADDRESS	<b>100 PARK AVENUE</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>NEW YORK NY</b>	2.4 CITY - ST - ZIP	
TITLE	<b>VD</b>	3.1 TITLE	
NAME	<b>BAUR, WALTER H.</b>	3.2 NAME	
STREET ADDRESS	<b>100 PARK AVENUE</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>NEW YORK NY</b>	3.4 CITY - ST - ZIP	
TITLE	<b>VD</b>	4.1 TITLE	
NAME	<b>SILVERSTEIN, LAWRENCE A</b>	4.2 NAME	
STREET ADDRESS	<b>100 PARK AVENUE</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>NEW YORK NY</b>	4.4 CITY - ST - ZIP	
TITLE	<b>DC</b>	5.1 TITLE	
NAME	<b>HERTZOG, ROGERS</b>	5.2 NAME	
STREET ADDRESS	<b>100 PARK AVENUE</b>	5.3 STREET ADDRESS	
CITY - ST - ZIP	<b>NEW YORK NY</b>	5.4 CITY - ST - ZIP	
TITLE	<b>V</b>	6.1 TITLE	<b>COO/V/D</b>
NAME	<b>PROVINI, CHARLES</b>	6.2 NAME	
STREET ADDRESS	<b>100 PARK AVENUE</b>	6.3 STREET ADDRESS	
CITY - ST - ZIP	<b>NEW YORK NY</b>	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)(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: Lawrence A. Silverstein 5/22/97 (212) 376-8700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)