

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

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 823957 (6)
1. Corporation Name
PACIFIC MUTUAL DISTRIBUTORS, INC.

Principal Place of Business 700 NEWPORT CENTER DR. P. O. BOX 9000 NEWPORT BEACH CA 92658	Mailing Address 700 NEWPORT CENTER DR. P.O. BOX 9000 NEWPORT BEACH CA 92658 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/13/1970	4. FEI Number 95-2594489	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
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		

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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
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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	S MILFS, AUDREY L	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	700 NEWPORT CENTER DR	1.2 NAME	
STREET ADDRESS	NEWPORT BCH, CA 00000	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	P GERALD W. ROBINSON	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	700 NEWPORT CENTER DRIVE	2.2 NAME	
STREET ADDRESS	NEWPORT BEACH CA	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D SCHAFFER, GLENN S.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	700 NEWPORT CENTER DR	3.2 NAME	
STREET ADDRESS	NEWPORT BCH, CA 00000	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D SUTTON, THOMAS C.	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	700 NEWPORT CENTER DRIVE	4.2 NAME	
STREET ADDRESS	NEWPORT BEACH CA	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	V WARD, DON M.	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	700 NEWPORT CENTER DR	5.2 NAME	
STREET ADDRESS	NEWPORT BCH, CA 00000	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D GERALD W. ROBINSON	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	700 NEWPORT CENTER	6.2 NAME	
STREET ADDRESS	NEWPORT BEACH CA	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 _____ AUDREY L. MILES, SECRETARY 4/09/98

CR2E034 (10/97)