

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

FILED
Apr 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P 34630
 1. Corporation Name
Liberty Securities Corporation

Principal Place of Business Mailing Address
100 Manhattanville Road
Purchase, NY 10577

21. Principal Place of Business	22a. Mailing Address	4. Fee Number	Applied For
	See above	04-3119940	Not Applicable
22. State, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		<input checked="" type="checkbox"/>	
23. City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		<input type="checkbox"/>	
24. Zip	Country	29. Zip	Country

3. Date Incorporated or Qualified	3a. Date of Last Report
7/11/91	5/96

9. Name and Address of Current Registered Agent
CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

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 agent, officer 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, officer or both, 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 re-stating) **700002151647**
 Date **04/23/97-01031-038**

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONAL OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	P JOHN T. TREECE, JR
1.3 STREET ADDRESS	100 MANHATTANVILLE ROAD
1.4 CITY - ST - ZIP	PURCHASE, NY 10577
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	COO/D DENNIS C. RUSHOVICH
2.3 STREET ADDRESS	100 MANHATTANVILLE ROAD
2.4 CITY - ST - ZIP	PURCHASE, NY 10577
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VP/ASST. S/GENERAL COUNS. BRUCE F. RIPEPI
3.3 STREET ADDRESS	100 MANHATTANVILLE ROAD
3.4 CITY - ST - ZIP	PURCHASE, NY 10577
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	T CLIFFORD MICKENBERG
4.3 STREET ADDRESS	100 MANHATTANVILLE ROAD
4.4 CITY - ST - ZIP	PURCHASE, NY 10577
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	S JOHN A. BENNING
5.3 STREET ADDRESS	600 ATLANTIC AVE.
5.4 CITY - ST - ZIP	BOSTON, MA 02210-2214
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	D DENIS KAPLAN
6.3 STREET ADDRESS	100 MANHATTANVILLE RD.
6.4 CITY - ST - ZIP	PURCHASE, NY 10577

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 contained 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 on Block 12 or Block 13, or on an attachment with an address.

SIGNATURE: **BRUCE F. RIPEPI** **4/8/97** (914) 6965600
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)