Form 4 or Form 5 obligation 1. Name and Address of Reports McKenzie, Floretta D. 1. Co The Wackenhut Corports Address of Reports of Repor	NEFICIAL OWNERSHIP Onger subject to Section 16. Ins may continue. See Instruction Orting Person ration 100 33410-4243 Or Trading Symbol Orporation Number of Reporting Person (Volumeriginal (Month/Year) Ing Person(s) to Issuer (Check aller () Officer (give title below Ing Filing (Check Applicable Line	intary) .l applicable) bw) () Other		
Table I Non-Derivative	Securities Acquired, Disposed o	of, or Beneficiall	Ly Owned	
1. Title of Security	2. 3. 4.Securities Acq Transaction or Disposed of Date Code V Amount		5.Amount of Securities Beneficially Owned at End of Month	6.Dir 7.Nature of Indirect ect Beneficial Ownership (D)or Indir ect(I)
Common Stock	1 11	<u> </u>	200	D

.Title of Derivative	l2.Con-	13.	14.	5.Number	of De		7.Title and Amount	8.Price	e 9.Number	10. 11.Nature of
Security 	version			•		cisable and			lof Deriva	Dir Indirect
	or Exer	İ	1	rities A	cqui	Expiration	Securities	vative	tive	ect Beneficial
	cise	İ	İ	red(A) c	r Dis	Date(Month/		Secu	Securities	(D) Ownership
	Price of		1	posed of	(D)	Day/Year)		rity	Benefi	or
	Deriva-			1		Date Expir			ficially	Ind
	tive		1	1	A/	/ Exer- ation	Title and Number	1	Owned at	ire
	Secu-			1	D	cisa- Date	of Shares	1	End of	ct
	rity	Date	Code V	/ Amount	<u> </u>	ble		1	Month	(I)
Director Stock Option	16.875	4/24/	IA I	1,000	ĮΑ	4/24/ 4/23/	Common Stock 1,000	1	1,000	D
	i	197	í i	i '	i	i97 i07 i	i '	i	i '	i i

Explanation of Responses: SIGNATURE OF REPORTING PERSON /s/ Floretta D. McKenzie BY J. P. Rowan as Attorney-in-Fact DATE 5/5/97