

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 31 PM 2: 54

DOCUMENT # P33869 (9)
1. Corporation Name
FORWARD FINANCIAL COMPANY

Principal Place of Business Mailing Address
360 CHURCH ST., NORTHBORO MA 01532 **360 CHURCH ST., NORTHBORO MA 01532**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		05/07/1991	06/17/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		04-2590778	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		28		<input type="checkbox"/>	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
MURPHY, RONALD T. 4740 CLEVELAND HEIGHTS BLVD., LAKELAND FL 33813				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				10. Name and Address of New Registered Agent	
				B1 Name	
				B2 Street Address (P.O. Box Number is Not Acceptable)	
				B3	
				B4 City	FL B5 Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEFEUDIS, GENE J.	1.2 NAME	
STREET ADDRESS	63 CHERRY ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBORO MA	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEFEUDIS, GENE J.	2.2 NAME	
STREET ADDRESS	63 CHERRY ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	NORTHBORO MA	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	V.P.
STREET ADDRESS		3.3 STREET ADDRESS	Richard J. Faucher
CITY-ST-ZIP		3.4 CITY-ST-ZIP	18 Upland Street Atkinson, NH-03811
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	V.P.
STREET ADDRESS		4.3 STREET ADDRESS	John D. Mullen
CITY-ST-ZIP		4.4 CITY-ST-ZIP	208 Main Street Medway, MA-02053
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	VP
STREET ADDRESS		5.3 STREET ADDRESS	Joanne A. Doherty
CITY-ST-ZIP		5.4 CITY-ST-ZIP	48 Chapel Street Cherry Valley, MA 01611
TITLE		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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: Gene J. DeFeudis Gene J. DeFeudis, President, January 23, 1995 508-393-5300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR