) NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. IT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION NNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

CUMENT # P96000095425

OSS COUNTRY HOME HOLDINGS, INC.

400 Sawgrass Corporate pk

LORIDA

CORPORATION SERVICE COMPANY

TALLAHASSEE FL 32301-2525

1201 HAYS STREET

Country

USA

9. Name and Address of Current Registered Agent

at Place of Business MYSTIC VALLEY PARKWAY ORD MA 02155

ncipal Place of Business

ite, Apt. #, etc.

Sunrise

GNATURE:

ty & State

р 33325

Mailing Address

Mailing Address

Suite, Apt. #, etc.

33355-1540

City & State

Ft.

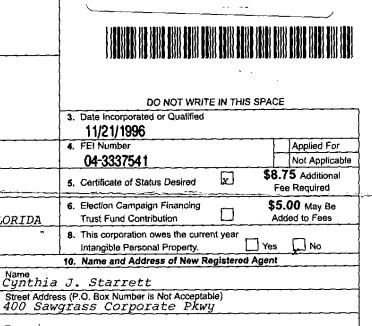
4040 MYSTIC VALLEY PARKWAY MEDFORD MA 02155

P.O. Box 551540

Lauderdale,

FILED Sep 02, 1999 8:00 am Secretary of State

09-02-1999 90008 038 ***558.75



85 Zip Code 33325 Sunrise

84 Cíty

Country

USA

82

Pursuant office or r agent. I a	to the provisions of sections 607,0502 an registered agent, or both; in the State of F im familiar with, and accept the obligation	florida. Such change was aut is of, section 607.0505, Florid	the above-named co horized by the corpo la Statutes.	proration submits this statement for the purpose of changing its regional oration's board of directors. I hereby accept the appointment as regional oration is a second or directors.	istered istered	
NATURE .	Circlino C	Starrett		8/24/99		
	Signature, typed or printed name of registered agentiand	, , , , , , , , , , , , , , , , ,	: Registered Agent signatur	e required when reinstating) DATE		
	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
}	PD	DELETE	1.1 TITLE	President X Change	Addition	
l	WOLK, HOWARD L.		1.2 NAME	Kenneth Harthausen		
T ADDRESS	20 CHAPEL ST.		1.3 STREET ADDRESS	400 Sawgrass Corporate Pkwy		
T-ZIP	BROOKLINE MA		1.4 CITY-ST-ZIP	Sunrise, FL 33325		
	SD	DELETE	2.1 TITLE	Secretary x Change	Addition	
}	WOLK, NATHAN T.		2.2 NAME	Cynthia J. Starrett		
TADDRESS	230 ALLENDALE RD.	,	2.3 STREET ADDRESS	400 Sawgrass Corporate Pkwy Sunrise FL 33325		
T-ZIP	CHESTNUT HILL MA	·	2.4 CITY-ST-ZIP			
	VD	DELETE	3.1 TITLE	$\overline{VP}/\overline{D}$ Change [X Addition	
]	WOLK, JEFFREY		3.2 NAME	Howard Wolk	•	
TADORESS	28 MALBOROUGH ST.		3.3 STREET ADDRESS	400 Sawgrass Corporate Pkwy	,	
T-ZIP	BOSTON MA		3.4 CITY-ST-ZIP	Sunrise, FL 33325		
	TD	DELETE	4.1 TITLE	Treasurer X Change	Addition	
}	WOLK, SIDNEY		4.2 NAME	Thomas Graham		
T ADDRESS	330 BEACON ST.		4.3 STREET ADDRESS	400 Sawqrass Corporate Pkwy		
T-ZIP	BOSTON MA		4.4 CITY-ST-ZIP	Sunrise, FL 33325		
	AT	DELETE	5.1 TITLE	Change (Addition	
}	SCAPICCHO, STEPHEN		5.2 NAME	· '		
T ADDRESS	8 NEPTUNE CIRCLE		5.3 STREET ADDRESS			
7-ZIP	EAST BOSTON MA		5.4 CITY-ST-ZIP		<u> </u>	
		DELETE	6.1 TITLE	Change {	Addition	
			5.2 NAME			
TADDRESS	CANADA SERVICE		6.3 STREET ADDRESS			
T-71P	医肾分离 经分离		6.4 CITY-ST-ZIP			

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 n Block 12 or Block 13 if changed, or on an attachment with an address.