

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 223922 (6)
1. Corporation Name
CENTRAL PLAZA THOM MCAN INC

1181



Principal Place of Business
67 MILLBROOK STREET
WORCESTER MA 01606

Mailing Address
67 MILLBROOK STREET
WORCESTER MA 01606
US

3. Date Incorporated or Qualified 05/20/1959 3a. Date of Last Report 05/01/1995

| | | | |
|--------------------------------|---------------------|---|--|
| 2. Principal Place of Business | 2a. Mailing Address | 4. FEI Number | Applied For |
| 21 | 26 | 04-2264200 | Not Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 22 | 27 | <input type="checkbox"/> | |
| City & State | City & State | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| 23 | 28 | <input type="checkbox"/> | |
| Zip | Zip | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 24 | 29 | | |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 official acceptable

(If the Registered Agent signature is required when registering)

Date

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------|---|--|
| TITLE | PD | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MCVEY, LARRY A | 1.2 NAME | |
| STREET ADDRESS | 67 MILLBROOK ST | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | WORCESTER, MA 00000 | 1.4 CITY-ST-ZIP | |
| TITLE | VD | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | WOZNAK, EDWARD S | 2.2 NAME | |
| STREET ADDRESS | 67 MILLBROOK ST | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | WORCESTER, MA 00000 | 2.4 CITY-ST-ZIP | |
| TITLE | TV | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | WOZNAK, EDWARD S | 3.2 NAME | |
| STREET ADDRESS | 67 MILLBROOK ST | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | WORCESTER, MA 00000 | 3.4 CITY-ST-ZIP | |
| TITLE | S | 4.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | LARENCE ROGER | 4.2 NAME | |
| STREET ADDRESS | 67 MILLBROOK ST | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | WORCESTER, MA 00000 | 4.4 CITY-ST-ZIP | |
| TITLE | AS | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KNIGHT, HENRIETTA | 5.2 NAME | |
| STREET ADDRESS | 67 MILLBROOK ST | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | WORCESTER, MA 00000 | 5.4 CITY-ST-ZIP | |
| TITLE | D | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | OURAESHI, SHAHID | 6.2 NAME | |
| STREET ADDRESS | ONE THEALL ROAD | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | RYE NY | 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 119.07(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 amendment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ASSISTANT SECRETARY

ROGER LARENCE APR 26 1996 (508) 791-3811

Date

Day After Phone #

CR2E034 (12/95)

*ALL STATES
April 12, 1996
Business*

THOM MCAN DIVISION

PRESIDENT

Larry A. McVey

67 Millbrook Street, Worcester, MA 01606

VICE PRESIDENTS

*Theodore L. Anderson
Edward S. Wozniak*

*67 Millbrook Street, Worcester, MA 01606
67 Millbrook Street, Worcester, MA 01606*

TREASURER

Edward S. Wozniak

67 Millbrook Street, Worcester, MA 01606

SECRETARY

Edward J. Lucey

67 Millbrook Street, Worcester, MA 01606

ASSISTANT SECRETARY

Roger Larence

67 Millbrook Street, Worcester, MA 01606

DIRECTORS

*Theodore L. Anderson
Michael R. Brennan
Larry A. McVey
Arthur V. Richards
Edward S. Wozniak*

*67 Millbrook Street, Worcester, MA 01606
One Theall Road, Rye, NY 10580
67 Millbrook Street, Worcester, MA 01606
One Theall Road, Rye, NY 10580
67 Millbrook Street, Worcester, MA 01606*