

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

FILED  
May 12 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 325962 (9)  
1. Corporation Name  
CORAL WAY THOM MCAN, INC.



Principal Place of Business  
6 MILLBROOK ST  
WORCESTER MASS 01606  
933 MAC ARTHUR BLVD.  
MAHWAH, N.J. 07430

Mailing Address  
6 MILLBROOK ST  
WORCESTER MASS 01606-2817  
933 MAC ARTHUR BLVD.  
MAHWAH, N.J. 07430

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
25 USA

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country  
30 USA

3. Date Incorporated or Qualified  
02/01/1968

3a. Date of Last Report  
05/01/1996

4. FEI Number  
04-2434120

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	MCVEY, LARRY A	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		67 MILLBROOK ST	
CITY-ST-ZIP		WORCESTER, MA 00000	
TITLE	VD	WOZNAK, EDWARD S.	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		67 MILLBROOK ST	
CITY-ST-ZIP		WORCESTER, MA 00000	
TITLE	VD	ANDERSON, THEODORE L.	<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS		67 MILLBROOK ST	
CITY-ST-ZIP		WORCESTER, MA 00000	
TITLE	TV	WOZNAK, EDWARD S	<input checked="" type="checkbox"/> DELETE
NAME			
STREET ADDRESS		67 MILLBROOK ST	
CITY-ST-ZIP		WORCESTER, MA 00000	
TITLE	AS	LARENCE ROGER	<input checked="" type="checkbox"/> DELETE
NAME			
STREET ADDRESS		67 MILLBROOK ST	
CITY-ST-ZIP		WORCESTER, MA 00000	
TITLE			<input type="checkbox"/> DELETE
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P J. M. ROBINSON	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	933 MAC ARTHUR BLVD.	
1.4 CITY-ST-ZIP	MAHWAH, N.J. 07430	
2.1 TITLE	S EDWARD J. LUCBY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	AS GERALD BAHLMAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	933 MAC ARTHUR BLVD.	
5.4 CITY-ST-ZIP	MAHWAH, N.J. 07430	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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 its 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 in an attachment with an address.

SIGNATURE:

GERALD BAHLMAN

JAN 13 1997

(201) 934-2000

CR2E034 (9/96)