

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
--	---	--

DOCUMENT # 348148

(8)

1. Corporation Name

HAVEN MALL THOM MCAN, INC.

Principal Place of Business

67 MILLBROOK STREET
WORCESTER, MA 01600

933 MAC ARTHUR BLVD.
MAHWAH, N.J. 07430

Mailing Address

67 MILLBROOK STREET
WORCESTER, MA 01600-2817

933 MAC ARTHUR BLVD.
MAHWAH, N.J. 07430

1459
L496



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

USA

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

USA

3. Date Incorporated or Qualified

06/17/1969

3a. Date of Last Report

05/01/1996

4. FEI Number

04-2453457

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

FL

85 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

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 ☐ DELETE

NAME MCVEY, LARRY A
STREET ADDRESS 67 MILLBROOK ST
CITY-ST-ZIP WORCESTER, MA 00000

TITLE VD ☐ DELETE

NAME WOZNIAK, EDWARD S.
STREET ADDRESS 67 MILLBROOK ST
CITY-ST-ZIP WORCESTER, MA 00000

TITLE VD ☐ DELETE

NAME ANDERSON, THEODORE L.
STREET ADDRESS 67 MILLBROOK ST
CITY-ST-ZIP WORCESTER, MA 00000

TITLE AS ☒ DELETE

NAME LARENCE ROGER
STREET ADDRESS 67 MILLBROOK ST
CITY-ST-ZIP WORCESTER, MA 00000

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME P.J.M. ROBINSON
1.3 STREET ADDRESS 933 MAC ARTHUR BLVD.
1.4 CITY-ST-ZIP MAHWAH, N.J. 07430

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME EDWARD J. LUCBY

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME AS GERALD BAHLMAN
4.3 STREET ADDRESS 933 MAC ARTHUR BLVD.
4.4 CITY-ST-ZIP MAHWAH, N.J. 07430

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 reports 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, 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, or on an attachment with an address.

SIGNATURE

GERALD BAHLMAN

JAN 13 1997

(201) 934-2000

CR2E034 (9/96)