

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 418317 (4)  
1. Corporation Name  
UNIVERSITY-TAMPA THOM MCAN, INC.

1664



Principal Place of Business: 67 MILLBROOK STREET WORCESTER MA 01606  
Mailing Address: 67 MILLBROOK STREET WORCESTER MA 01606

3. Date Incorporated or Qualified: 02/05/1973  
3a. Date of Last Report: 05/01/1995  
4. FEI Number: 04-2513670  
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

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25  
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

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

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 date of filing) (NOTE: Registered Agent signature required when terminating)

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	MCVEY, LARRY A	
STREET ADDRESS	67 MILLBROOK ST	
CITY-ST-ZIP	WORCESTER, MA 00000	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WOZNAK, EDWARD S.	
STREET ADDRESS	67 MILLBROOK ST	
CITY-ST-ZIP	WORCESTER, MA 00000	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	FERRAIOLI, RICHARD A	
STREET ADDRESS	67 MILLBROOK ST	
CITY-ST-ZIP	WORCESTER, MA 00000	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ANDERSON, THEODORE L.	
STREET ADDRESS	67 MILLBROOK ST	
CITY-ST-ZIP	WORCESTER, MA 00000	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	KNIGHT, HENRIETTA	
STREET ADDRESS	67 MILLBROOK ST	
CITY-ST-ZIP	WORCESTER, MA 00000	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	LARENCE, ROGER	
STREET ADDRESS	67 MILLBROOK ST	
CITY-ST-ZIP	WORCESTER, MA 00000	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input 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		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

SEPARATE SCHEDULE

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 attachment with an address.

SIGNATURE: *Roger Larence*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
ASSISTANT SECRETARY

ROGER LARENCE APR 26 1996 (508) 791-3811

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  
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