

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



Principal Place of Business 6 MILLBROOK STREET WORCESTER MA 01606 933 MAC ARTHUR BLVD. MAHWAH, N.J. 07430	Mailing Address 6 MILLBROOK STREET WORCESTER MA 01606 933 MAC ARTHUR BLVD. MAHWAH, N.J. 07430
2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country USA	28 Zip Country USA
24	29

3. Date Incorporated or Qualified 02/05/1973	3a. Date of Last Report 05/01/1996
4. FEI Number 04-2513670	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCVEY, LARRY A	1.2 NAME	P.G.M. ROBINSON
STREET ADDRESS	67 MILLBROOK ST	1.3 STREET ADDRESS	933 MAC ARTHUR BLVD.
CITY-ST-ZIP	WORCESTER, MA 00000	1.4 CITY-ST-ZIP	MAHWAH, N.J. 07430
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOZNAK, EDWARD S.	2.2 NAME	S EDWARD J. LUCBY
STREET ADDRESS	67 MILLBROOK ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	WORCESTER, MA 00000	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, THEODORE L.	3.2 NAME	
STREET ADDRESS	67 MILLBROOK ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	WORCESTER, MA 00000	3.4 CITY-ST-ZIP	
TITLE	AS	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LARENCE, ROGER	4.2 NAME	AS GERALD BAHLMAN
STREET ADDRESS	67 MILLBROOK ST	4.3 STREET ADDRESS	933 MAC ARTHUR BLVD.
CITY-ST-ZIP	WORCESTER, MA 00000	4.4 CITY-ST-ZIP	MAHWAH, N.J. 07430
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 the receiver or trustee or empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 (changed) or on an attachment with an address.

SIGNATURE: _____ DATE: **JAN 13 1997** (201) 934-2000
GERALD BAHLMAN

CR2E034 (9/96)