

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 # 804544 (5)

1. Corporation Name

BENEFICIAL MANAGEMENT CORPORATION OF AMERICA

Principal Place of Business

ONE CHRISTINA CENTER
301 NORTH WALNUT STREET
WILMINGTON DE 19801

Mailing Address

300 BENEFICIAL CENTER
PEAPACK NJ 07977



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

03/25/1936

3a. Date of Last Report

05/01/1995

4. FEI Number

51-0003840

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

10. Name and Address of New Registered Agent

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 appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME FARRIS, DAVID J.
STREET ADDRESS 301 N. WALNUT ST.
CITY- ST- ZIP WILMINGTON DE

TITLE VSD ☐ DELETE
NAME LEWIS, JANICE L.
STREET ADDRESS 301 N. WALNUT ST.
CITY- ST- ZIP WILMINGTON DE

TITLE VD ☒ DELETE
NAME GROHOL, ROBERT M.
STREET ADDRESS 200 BENEFICIAL CNTR
CITY- ST- ZIP PEAPACK NJ

TITLE VD ☒ DELETE
NAME NIEBISCH, MANFRED E.
STREET ADDRESS 200 BENEFICIAL CNTR
CITY- ST- ZIP PEAPACK NJ

TITLE VD ☐ DELETE
NAME HEYWOOD, J.C.
STREET ADDRESS 200 BENEFICIAL CENTER
CITY- ST- ZIP PEAPACK NJ

TITLE VTD ☐ DELETE
NAME DAWSON, ELIZABETH A.
STREET ADDRESS 301 N. WALNUT ST.
CITY- ST- ZIP WILMINGTON DE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP ☐ Change ☐ Addition

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

EXECUTIVE VICE PRESIDENT,
DIRECTOR

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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. A. DAWSON, VP & TREASURER

3/19/96

(908) 781-3381

DAY

Daytime Phone #

CR2E034 (12/95)