

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 814148 (3)  
1. Corporation Name  
ROUTE 441-DADE THOM MCAN CORP.

4006



Principal Place of Business  
67 MILLBROOK STREET  
#4006  
WORCESTER MA 01606

Mailing Address  
67 MILLBROOK STREET  
#4006  
WORCESTER MA 01606

3. Date Incorporated or Qualified 01/11/1960	3a. Date of Last Report 05/01/1995
4. FEI Number 04-2270642	Applied For 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 type="checkbox"/> Yes <input type="checkbox"/> No	

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

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

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

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 (Type the printed name of the individual and the corporation)

NOTE: Registered Agent signature required when changing

Date

12. OFFICERS AND DIRECTORS

TITLE	AS	<input type="checkbox"/> DELETE
NAME	LARENCE, ROGER	<input checked="" type="checkbox"/>
STREET ADDRESS	67 MILLBROOK ST	
CITY-ST-ZIP	WORCESTER, MA 00000	
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	WOZNIAK, 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	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

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

000001844580  
-05/30/96--01056--011  
\*\*\*450.00

5/30/92

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 119.37(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

ROGER LARENCE APR 26 1996 (508) 791-3811

ASSISTANT SECRETARY

Date

Signature Printed

CR2E034 (12/95)

- 814148

2-2

ALL STATES  
May 1, 1996  
Business

## THOM MCAN DIVISION

### PRESIDENT

Larry A. McVey

67 Millbrook Street, Worcester, MA 01606

### VICE PRESIDENTS

Theodore L. Anderson

67 Millbrook Street, Worcester, MA 01606

### TREASURER

OPEN POSITION

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

67 Millbrook Street, Worcester, MA 01606  
One Theall Road, Rye, NY 10580  
67 Millbrook Street, Worcester, MA 01606  
One Theall Road, Rye, NY 10580