

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **838399** (4)

T Corporation Name

**FAMILY CENTER, INC.**



Principal Place of Business

Mailing Address

2 PARAGON DRIVE  
ATTN: TAX DEPARTMENT  
MONTVALE NJ 07645

2 PARAGON DRIVE  
ATTN: TAX DEPARTMENT  
MONTVALE NJ 07645

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Zip Country

25. Country

29. Zip Country

30. Country

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 607.0600 and 607.1500, 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 further authorized to accept the obligations of Section 607.0600, Florida Statutes.

SIGNATURE

Signature of Agent/Registered Office

DATE

12. OFFICERS AND DIRECTORS

12.1	NAME	PD DOBSON, DONALD	<input type="checkbox"/> DELETE
12.2	STREET ADDRESS	2 PARAGON DR	
12.3	CITY, ST, ZIP	MONTVALE NJ	
12.4	TITLE	V	<input type="checkbox"/> DELETE
12.5	NAME	CORRADO, FRED	
12.6	STREET ADDRESS	2 PARAGON DR	
12.7	CITY, ST, ZIP	MONTVALE NJ	
12.8	TITLE	AS	<input type="checkbox"/> DELETE
12.9	NAME	ULRICH, ROBERT G.	
12.10	STREET ADDRESS	2 PARAGON DR	
12.11	CITY, ST, ZIP	MONTVALE NJ	
12.12	TITLE	V	<input type="checkbox"/> DELETE
12.13	NAME	COURTNEY, TIMOTHY J.	
12.14	STREET ADDRESS	2 PARAGON DR	
12.15	CITY, ST, ZIP	MONTVALE NJ	
12.16	TITLE	V	<input type="checkbox"/> DELETE
12.17	NAME	HART, NED	
12.18	STREET ADDRESS	2 PARAGON DR	
12.19	CITY, ST, ZIP	MONTVALE NJ	
12.20	TITLE	ST	<input type="checkbox"/> DELETE
12.21	NAME	MURTHA, RICHARD	
12.22	STREET ADDRESS	2 PARAGON DR.	
12.23	CITY, ST, ZIP	MONTVALE NJ	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	NAME	
13.3	STREET ADDRESS	
13.4	CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5	TITLE	
13.6	NAME	
13.7	STREET ADDRESS	
13.8	CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.9	TITLE	
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.13	TITLE	
13.14	NAME	
13.15	STREET ADDRESS	
13.16	CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.17	TITLE	
13.18	NAME	
13.19	STREET ADDRESS	
13.20	CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied herein 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 officer 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 deleted, together with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Timothy J. Courtney, Vice President**

01-15-96 (201) 573-9700  
Date Printed

CR2E034 (12/95)