2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9300003417 Apr 04, 2000 8:00 am Secretary of State NORTH AMERICAN FAMILY INSTITUTE, INC. 04-04-2000 90012 006 ****61.25 Mailing Address Principal Place of Business 10 HARBOR ST. 10 HARBOR ST. DANVERS MA 01923 DANVERS MA 01923-3390 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 04-2921507 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) JARLOCK, THOMAS J 1101 FORREST LAKE TERRACE NICEVILLE FL 32578 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE . (NOTE. Registered Agent signature required when reinstating) 'Signature, typed or printed name of registered agent and title if applicable. FILE NOW: Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FÉE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ... OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Delete TITI E Change NAME NAME Brown, Dr D STREET ADDRESS STREET ADDRESS 72 COLLEGE RD De Attache CITY-ST-ZIP Chestnut Hill Ma Addition Change Delete TITLE TITLE NAME NAME CHI-YING CHUNG, DR R STREET ADDRESS STREET ADDRESS OHIO STATE UNIVERSITY CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH Addition Change Delete TITLE TITLE NAME - - -NAME ISENBERG, JAMES -STREET ADDRESS STREET ADDRESS 6 OGDEN AVE CITY-ST-ZIP CITY-ST-ZIP <u>white plains ny</u> Addition Change TITLE ☐ Delete TITLE NAME NAME vincik, barbara dr. STREET ADDRESS STREET ADDRESS 72 BRADLEE AVE. CITY-ST-ZIP CITY-ST-ZIP SWAMPSCOTT MA Delete ☐ Change ■ Addition TITLE TITLE NAME NAME BAKAL, DR Y STREET ADDRESS STREET ADDRESS 59 Bayview RD CITY-ST-ZIP CITY-ST-ZIP Marblehead Ma ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME PARIS, HILDEGARDE NAME STREET ADDRESS STREET ADDRESS 265 PLEASANT ST. CITY-ST-7IP CITY-ST-ZIP MARBLEHEAD MA 01945 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address

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NORTH AMERICAN FAMILY INSTITUTE, INC.

OFFICERS

Title	Name	Address
Chairman of the Board	Jerold Madorsky	44 Pilgrim Road, Marblehead MA 01945
Treasurer	Howard Rich	289 Ocean Avenue, Marblehead, MA 01945
Assistant Treasurer	Hildegarde Paris	108 High Street, Unit 4, Charlestown, MA 02129
Clerk	Dr. Barbara Vinick	72 Bradlee Avenue, Swampscott, MA 01907

BOARD OF DIRECTORS

Name	Address
Dr. Barbara Vinick	72 Bradlee Avenue, Swampscott MA 01907
Dr. Frederic Bemak	73 East Torrence Road, Columbus, OH 43214
Margaret N. Zusky	234 Lowell Road, Wellesley, MA 02181
Dr. Rita Chi-Ying Chung	Ohio State University, Columbus OH 43210
Howard Rich	289 Ocean Avenue, Marblehead, MA 01945
Jerold Madorsky	44 Pilgrim Road, Marblehead MA 01945

Terms: Until successors are duly elected and qualified.

As of: 12/99