

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 # P25275 (9)

1. Corporation Name
OXFORD & ASSOCIATES, INC. OF THE SOUTHEAST

Principal Place of Business: **4 CENTENNIAL DRIVE PEABODY, MA 01961**
Mailing Address: **4 CENTENNIAL DRIVE PEABODY, MA 01961**

2. Principal Place of Business: **21 SEE ABOVE**
22. Suite, Apt. #, etc.:
23. City & State:
24. Zip: Country:
25. Mailing Address: **26 SEE ABOVE**
27. Suite, Apt. #, etc.:
28. City & State:
29. Zip: Country:
30.

3. Date Incorporated or Qualified: **07/21/89**
3a. Date of Last Report: **6/29/95**
4. FEI Number: **04-2838827**
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

9. Name and Address of Current Registered Agent

**THE PRENTICE - HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE, FL 32301**

10. Name and Address of New Registered Agent

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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P/S/D	<input type="checkbox"/> DELETE
NAME	THOMAS F. RYAN	
STREET ADDRESS	206 LOCHA DRIVE	
CITY - ST - ZIP	JUPITER, FL 33458	
TITLE	VIT/AS	<input type="checkbox"/> DELETE
NAME	JOHN G. WELLMAN, JR.	
STREET ADDRESS	49 CHURCH STREET	
CITY - ST - ZIP	NORTHBORO, MA 01532	
TITLE	V	<input type="checkbox"/> DELETE
NAME	JOSEPH M. GUIRK	
STREET ADDRESS	236 ALLEN ROAD	
CITY - ST - ZIP	BILLERICA, MA 01821	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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	

000001783180
-04/17/96--01008--017 Change Addition
*****200.00**

4/16/96
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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, changed, or on an attachment with a address.

SIGNATURE: **JOHN G. WELLMAN, JR.** 3/29/96 508-538-1724
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

CR2E034 (12/95)