

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

1-2

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P36090** (9)
1. Corporation Name
NMC VENTURES, INC.



Principal Place of Business
**1601 TRAELO ROAD
WALTHAM MA 02154**

Mailing Address
**1601 TRAELO ROAD
WALTHAM MA 02154**

3. Date Incorporated or Qualified
10/29/1991

3a. Date of Last Report
05/01/1995

4. FEI Number
04-3134792

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

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED
D	SPEARS, PETER	11 HEARTHSTONE PLACE	ANDOVER MA	<input type="checkbox"/>
VP	AMBROSE, JOHN	10 BRADLEY ROAD	MARBLEHEAD MA	<input type="checkbox"/>
VP	KOLF, JAMES	6 ORCHARD CIRCLE	SWANSCOTT MA	<input checked="" type="checkbox"/>
S	WHITING, JOHN K IV	16 UNION STREET	NORFOLK MA	<input type="checkbox"/>
T	NOGEOLO, A. M	19 WASHINGTON STREET	SUDBURY MA	<input type="checkbox"/>
D	HAMPERS, CONSTANTINE L	EAST LAKE ROAD, BOX 494,	OAKHILL DUBLIN NH	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
500001794325 -04725796--01033--010 ***5800.00																							
SEE ATTACHED																							

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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ASS'T TREASURER

Date

Daytime Phone #

CR2E034 (12/95)

NMC HOMECARE, INC. AND SUBSIDIARIES
 AMERICAN HOMECARE EQUIPMENT, INC.
 NMC HOMECARE OF MICHIGAN, INC.
 NATIONA MEDICAL CARE HOME CARESERVICE AGENCY, INC.
 PERSONAL CARE HEALTH SERVICES, INC.
 LIST OF DIRECTORS AND OFFICERS

EFFECTIVE 03/15/1996

DIRECTORS	OFFICE HELD	SS NUMBER	HOME ADDRESS
CONSTANTINE HAMBERS, M.D.	DIRECTOR	190-24-4388	EAST LAKE ROAD BOX 494, OAKHILL DUBLIN, NH 03444
PETER F. SPEARS	DIRECTOR	015-36-9504	11 HEARTHSTONE PLACE ANDOVER, MA 01810
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OFFICERS	OFFICE HELD	SS NUMBER	HOME ADDRESS
PETER F. SPEARS	PRESIDENT	015-36-9504	11 HEARTHSTONE PLACE ANDOVER, MA 01810
JOHN AMBROSE	VICE PRESIDENT	517-44-0531	10 BRADLEY ROAD MARBLEHEAD, MA 01945
A. MILES NOGELO	TREASURER	012-34-5855	19 WASHINGTON DRIVE SUDBURY, MA 01776
MARC S. LIEBERMAN	ASSISTANT TREASURER	108-38-6181	10 CROWN POINT ROAD SUDBURY, MA 01776
CAROL E. BOWEN	ASSISTANT SECRETARY	139-44-5206	187 GROVE STREET LEXINGTON, MA 02173

BUSINESS ADDRESS FOR OFFICERS/DIRECTORS
 RESERVOIR PLACE
 1801 TRAPELO ROAD
 WALTHAM, MA 02154
 (617)466-9850