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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 25 1996 8:00 am
Secretary of State

DOCUMENT # P95000063434 (1)

1. Corporation Name

WEINSTEIN FAMILY SERVICES, INC.

Principal Place of Business

383 STREET ROAD, EAST
TREVOSÉ PA 19053

Mailing Address

383 STREET ROAD, EAST
TREVOSÉ PA 19053

2. Principal Place of Business
21 111 SKOKIE BLVD.

Suite, Apt. #, etc.

City & State

23 WILMETTE, IL

Zip

24 60091

Country

2a. Mailing Address
26 4126 NORLAND AVENUE

Suite, Apt. #, etc.

City & State

28 BURNABY, B.C.

Zip

29 V5G 1S8

Country

30 CANADA

3. Date Incorporated or Qualified

08/16/1995

3a. Date of Last Report

4. FEI Number

59-3337916

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

CT 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

400001794784

84 City

04/25/96 01071-029
***200.00 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
MILLER, LAWRENCE J
STREET ADDRESS 16 GOLFVIEW DRIVE
CITY-ST-ZIP IVYLAND PA 18974

TITLE ☐ DELETE

NAME D
SHANE, WILLIAM R
STREET ADDRESS 17 CHARLES LANE
CITY-ST-ZIP CHERRY HILL NJ 08003

TITLE ☐ DELETE

NAME D
LOEWEN, RAYMOND L
STREET ADDRESS 7592 LAMBETH DRIVE
CITY-ST-ZIP BURNABY, B.C. CANADA V5E 1Z5

TITLE ☒ DELETE

NAME D
WATWON, A.M. BRUCE
STREET ADDRESS 12384 GAINESWAY
CITY-ST-ZIP RIDGEWOOD KY 41094

TITLE ☐ DELETE

NAME D
WEINSTEIN, JOEL
STREET ADDRESS 17197 WHITEHAVEN DRIVE
CITY-ST-ZIP BOCA RATON FL 33496

TITLE ☐ DELETE

NAME D
CUTLER, NORM
STREET ADDRESS 857 STONE GATE DRIVE
CITY-ST-ZIP HIGHLAND PARK IL 60035

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 3190 TREMONT AVENUE
1.4 CITY-ST-ZIP TREVOSÉ, PA 19053

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 3190 TREMONT AVENUE
2.4 CITY-ST-ZIP TREVOSÉ, PA 19053

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 4126 NORLAND AVENUE
3.4 CITY-ST-ZIP BURNABY, B.C., CANADA, V5G 3S8

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME DP
4.3 STREET ADDRESS WEINSTEIN, ROBERT A.
4.4 CITY-ST-ZIP 335 W. DUNDEE ROAD, #202
BUFFALO GROVE, IL 60089-3545

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME DC
5.3 STREET ADDRESS 111 SKOKIE BLVD.
5.4 CITY-ST-ZIP WILMETTE, IL 60091

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME CEO
6.3 STREET ADDRESS 111 SKOKIE BLVD.
6.4 CITY-ST-ZIP WILMETTE, IL 60091

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 named, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PETER S. HYNDMAN MARCH 22, 1996 (604) 299-9321

CR2E034 (12/95)

PROFIT CORPORATION ANNUAL REPORT

WEINSTEIN FAMILY SERVICES, INC.

13. CONTINUED:

ADDITION

7.1 TITLE: V
7.2 NAME: WEINSTEIN, MARK
7.3 STREET ADDRESS: 111 SKOKIE BOULEVARD
7.4 CITY-ST-ZIP: WILMETTE, IL 60091

8.1 TITLE: V
8.2 NAME: GROSSBERG, ARTHUR
8.3 STREET ADDRESS: 3201 N. 72ND AVENUE
8.4 CITY-ST-ZIP: HOLLYWOOD, FL. 33024

9.1 TITLE: ST
9.2 NAME: SCHWEER, MICHAEL L.
9.3 STREET ADDRESS: 800-50 EAST RIVERCENTER BLVD.
9.4 CITY-ST-ZIP: COVINGTON, KY 41011

10.1 TITLE: AS
10.2 NAME: BIRCH, TIMOTHY A.
10.3 STREET ADDRESS: 50 EAST RIVERCENTER BLVD.
10.4 CITY-ST-ZIP: COVINGTON, KY 41011

11.1 TITLE: DAS
11.2 NAME: HYNDMAN, PETER S.
11.3 STREET ADDRESS: 4126 NORLAND AVENUE
11.4 CITY-ST-ZIP: BURNABY, B.C., CANADA, V5G 3S8