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**Jun 03 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000089599 (1)
1. Corporation Name
EAST FLAGLER ST. THOM MCAN, INC.

5329 q



Principal Place of Business: **ONE TREALL ROAD RYE NJ 10880 933 MAC ARTHUR BLVD. MAHWAH, N.J. 07430**

Mailing Address: **ONE TREALL ROAD RYE NY 10880-4404 933 MAC ARTHUR BLVD. MAHWAH, N.J. 07430**

21	22	23	24	25	26	27	28	29	30
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report		4. FEI Number	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		11/22/1995		05/30/1996		APPLIED FOR 04 3298064	
City & State		City & State		<input type="checkbox"/>		\$8.75 Additional Fee Required		<input type="checkbox"/>	
Zip		Country		Zip		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
USA		USA		USA		USA		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
UNITED STATES CORPORATION COMPANY 1201 HAYS STREET 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 607.0502 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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	MCVEY, LARRY	1.2 NAME	J. M. Robinson
STREET ADDRESS	67 MILLBROOK STREET	1.3 STREET ADDRESS	933 MacArthur Blvd.
CITY-ST-ZIP	WORCESTER MA 01806	1.4 CITY-ST-ZIP	Mahwah, NJ 07430
TITLE	V	2.1 TITLE	
NAME	ANDERSON, THEODORE L.	2.2 NAME	
STREET ADDRESS	67 MILLBROOK STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	WORCESTER MA 01806	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	
NAME	LUCEY, EDWARD J.	3.2 NAME	
STREET ADDRESS	67 MILLBROOK STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	WORCESTER MA 01806	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	AS GERALD BAHLMAN
NAME	LARENCE, ROGER	4.2 NAME	933 MAC ARTHUR BLVD.
STREET ADDRESS	67 MILLBROOK STREET	4.3 STREET ADDRESS	MAHWAH, N.J. 07430
CITY-ST-ZIP	WORCESTER MA 01806	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	T
NAME	RICHARDS, ARTHUR V.	5.2 NAME	Donald V Roach
STREET ADDRESS	67 MILLBROOK STREET	5.3 STREET ADDRESS	933 MacArthur Blvd
CITY-ST-ZIP	WORCESTER MA 01806	5.4 CITY-ST-ZIP	Mahwah, NJ 07430
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 in changed or on an attachment with an address.

SIGNATURE _____ GERALD BAHLMAN JAN 26 1997 (201) 934-2000

CR2E034 (9/96)