

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F93000002550 (2)**

1. Corporation Name

MARK CENTERS TRUST, INC.



Principal Place of Business

600 THIRD AVENUE
KINGSTON PA 18704

Mailing Address

600 THIRD AVENUE
KINGSTON PA 18704

3. Date Incorporated or Qualified 06/02/1993	3a. Date of Last Report 03/21/1995
4. FEI Number 23-2715194	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21. Sub., Apt., #, etc.

26. Sub., Apt., #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. 25.

29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
SUITE 105
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 607.0405, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	WERTHEIMER, JACK	
STREET ADDRESS	600 THIRD AVENUE	
CITY-STATE-ZIP	KINGSTON PA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ZOOK, DAVID S	
STREET ADDRESS	600 THIRD AVENUE	
CITY-STATE-ZIP	KINGSTON PA 18704	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GERNEY, PETER G	
STREET ADDRESS	600 THIRD AVENUE	
CITY-STATE-ZIP	KINGSTON PA 18704	
TITLE	CFO	<input type="checkbox"/> DELETE
NAME	KANE, JOHSUA	
STREET ADDRESS	600 THIRD AVENUE	
CITY-STATE-ZIP	KINGSTON PA 18704	
TITLE	V	<input type="checkbox"/> DELETE
NAME	ALTHOFF, STEPHEN	
STREET ADDRESS	600 THIRD AVENUE	
CITY-STATE-ZIP	KINGSTON PA 18704	
TITLE	C	<input type="checkbox"/> DELETE
NAME	MARVIN, SLOWOWITZ	
STREET ADDRESS	313 SYLBERT DR	
CITY-STATE-ZIP	KINGSTON PA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	OPEN OFFICE
4. CITY-STATE-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	

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 for 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 in an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-18-96 (717) 288-4581

CR2E034 (12/95)