

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

95 JAN 31 PH 2:54

**DOCUMENT # 849788 (5)**

1. Corporation Name

**FLORIDA DIVISION OF BUCKLEY & COMPANY, INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business: 3401 MOORE ST PHILADELPHIA PA 19145  
Mailing Address: 3401 MOORE ST PHILADELPHIA PA 19145

3. Date Incorporated or Qualified: 07/22/1981  
3a. Date of Last Report: 07/26/1994  
4. FEI Number: 23-0442520  
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  
2a. Mailing Address: 26  
Suite, Apt. #, etc.: 22  
City & State: 27  
Zip: 24 Country: 25  
City & State: 28  
Zip: 29 Country: 30

9. Name and Address of Current Registered Agent:  
**UNITED STATE CORPORATION COMPANY  
226 W GEORGIA ST  
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  
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**

TITLE	VD
NAME	MARTOSELLA, JOSEPH M
STREET ADDRESS	4 BIDDLE WOOD LANE
CITY-ST-ZIP	WYNDMOORE PA
TITLE	I
NAME	BUCKLEY, ROBERT R.
STREET ADDRESS	779 ROBINHOOD RD.
CITY-ST-ZIP	ROSEMONT PA
TITLE	S
NAME	HANSEN, HOWARD J
STREET ADDRESS	2215 ELDER DR
CITY-ST-ZIP	WILMINGTON, DEL 0
TITLE	D
NAME	BUCKLEY, MARLENE A
STREET ADDRESS	779 ROBINHOOD RD
CITY-ST-ZIP	ROSEMONT, PA 0
TITLE	PD
NAME	BUCKLEY, ROBERT R
STREET ADDRESS	779 ROBINHOOD RD
CITY-ST-ZIP	ROSEMONT, PA 0
TITLE	
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	S PADULA, CHARLES M
3.3 STREET ADDRESS	121 PENN BLVD.
3.4 CITY-ST-ZIP	EAST LANSDOWNE, PA
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	

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 110.07(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 checked, or on an attached form with an address.

SIGNATURE: *Charles M. Padula*  
PRINT NAME AND TYPED OR REPRODUCED NAME OF SIGNING OFFICER OR DIRECTOR: **Charles M. Padula, Secretary**  
DATE: *JAN 24, 1995 (215) 334-2500*