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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P14791 (8)

1. Corporation Name

RICE, UNRUH, REYNOLDS CO.



Principal Place of Business

115 CHESTNUT STREET
PHILADELPHIA PA 19106

Mailing Address

115 CHESTNUT STREET
PHILADELPHIA PA 19106

3. Date Incorporated or Qualified

06/10/1987

3a. Date of Last Report

03/23/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

24

Zip

Country

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD ☐ DELETE

NAME GIGLIO, LAWRENCE
STREET ADDRESS 585 MCKENDIMEN
CITY-ST-ZIP MEDFORD NJ

TITLE PDT ☐ DELETE

NAME REYNOLDS, JOHN T.
STREET ADDRESS 3003 REISLER ROAD
CITY-ST-ZIP OXFORD PA

TITLE VD ☐ DELETE

NAME MANZI, NICHOLAS D JR
STREET ADDRESS 6836 ANDERSON STREET
CITY-ST-ZIP PHILADELPHIA PA

TITLE VD ☐ DELETE

NAME SHANNON, RICHARD
STREET ADDRESS 32 HIGHLAND CROSS
CITY-ST-ZIP RUTHERFORD NJ

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

CEmeritus/D

☒ Change ☐ Addition

Lawrence Giglio

109-A Long Beach Blvd.

Loveladies, NJ 08008

C/D/T

☒ Change ☐ Addition

John T. Reynolds

3056 Reisler Rd.

Oxford, PA 19363

P/D

☒ Change ☐ Addition

Nicholas D. Manzi, Jr.

125 Carnoustie Way

Media, PA 19063

V/D

☒ Change ☐ Addition

Richard F. Shannon

32 Highland Cross

Rutherford, NJ 07070

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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: *John T. Reynolds*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John T. Reynolds, Chairman/Director

3/08/96

(215) 931-4440

Date

Daytime Phone #

CR2E034 (12/95)