

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P18753

(4)

1. Corporation Name:

RADNOR/LAKESIDE CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 10:11

DO NOT WRITE IN THIS SPACE.

Principal Place of Business		Mailing Address	
1801 MARKET ST PHILADELPHIA PA 19103 US		1801 MARKET ST PHILADELPHIA PA 19103 US	
2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip		Zip	
Country		Country	
24		29	
25		30	
3. Date Incorporated or Qualified		3a. Date of Last Report	
04/08/1988		03/15/1994	
4. FEI Number		Applied For	
23-2505236		Not Applicable	
5. Certificate of Status Desired		8.75 Additional Fee Required	
☐		☐	
6. Election Campaign Financing		5.00 May Be Added to Fees	
Trust Fund Contribution		☐	
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 S. 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	
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 of Registered Agent required when registering)

(NOTE - Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	SZILVER, G.L.	1.2 NAME	
STREET ADDRESS	1801 MARKET ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	PHILADELPHIA PA	1.4 CITY - ST - ZIP	
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	BROWNLIE, THOMAS	2.2 NAME	
STREET ADDRESS	1801 MARKET ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	PHILADELPHIA PA	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	DINGUS, M.H.R.	3.2 NAME	
STREET ADDRESS	1801 MARKET ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	PHILADELPHIA PA	3.4 CITY - ST - ZIP	
TITLE	P	4.1 TITLE	☐ Change ☐ Addition
NAME	OSBURN, S H	4.2 NAME	
STREET ADDRESS	501 NORTH A1A	4.3 STREET ADDRESS	
CITY - ST - ZIP	JUPITER FL	4.4 CITY - ST - ZIP	
TITLE	VD	5.1 TITLE	☐ Change ☐ Addition
NAME	MULHOLLAND, P A	5.2 NAME	
STREET ADDRESS	1801 MARKET ST	5.3 STREET ADDRESS	
CITY - ST - ZIP	PHILADELPHIA PA	5.4 CITY - ST - ZIP	
TITLE	T	6.1 TITLE	☐ Change ☐ Addition
NAME	JONES, P M	6.2 NAME	
STREET ADDRESS	1801 MARKET ST	6.3 STREET ADDRESS	
CITY - ST - ZIP	PHILADELPHIA PA	6.4 CITY - ST - ZIP	

14. I 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)(b), 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 of this report, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS BROWNLIE, JR.

FEB. 2, 1995

215-977-6236