## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1998

825955

(8)

ROCK HILL PLAZA, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 20 1998 8:00am Secretary of State



250 KING OF PRUSSIA ROAD RADNOR PA 19087		250 KING OF PRUSSIA ROAD RADNOR PA 19087				DO NOT WRITE IN THIS SPAC	Έ		
						3. Date Incorporated or Qualified 03/29/1971			
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number	Aj	oplied For	
21		26				23-1737169	$\overline{}$	ot Applicable	
Suite, Apt.	#, <b>e</b> lc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional			
22		27						equired	
City & State	9	City & State						May Be	
23		[28]				· · · · · · · · · · · · · · · · · · ·		to Fees	
Žip	<b>⊢</b> ¬ ′			Country		8. This corporation owes or has paid the current y			
24 25 29 29 29 9. Name and Address of Current Registered Agent			30			Personal Property Tax due June 30.		₫ No	
CT		iogistorea Agent		B1	Name	10, Halito Billo Addition of How Hogistolog Agon	<u> </u>		
CT CORPORATION SYSTEM				U I ITAMIC					
	DO \$. PINE ISLAND ROAD		8	32	Street Addre	ess (P.O. Box Number is Not Acceptable)			
N	ANTATION FL 33324		-	93					
				"				;	
			8	34	City	<b></b> 85	Zip	Code	
44.5	10				<del></del>	FL  °°	L		
11. Pursuant t	t <b>o the</b> provisions of Sections 607.0502 a e <b>giste</b> red agent, or both, in the State of	and 607.1508, Florida Stati -Florida -Such chance was	utes, the abo authorized	ove bv	e-named corporation	oration submits this statement for the purpose of char on's board of directors. I hereby accept the appointm	iging if ient as	ts registered registered	
agent. La	m familiar with, and accept the obligation	ons of, Section 607. <b>0505,</b> F	Iorida Statu	tes	i.	,,			
ŞIGNATURE									
	Signature, typed or printed name of registered agent a			Ager	nt signature require	ed when reinstating) DATE	-0705	NO. IN L. 4.0.	
12.	OFFICERS AND I	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRE	ECTOR hange	Addition	
TITLE	MULLLIN, ARTHUR W	☐ Office IE	1.1 1174		1	ليا ل	папус	Addition	
NAME	250 KING OF PRUSSIA ROAD		1.2 NAM	i					
STREET ADDRESS	T 1			1.3 STREET ADDRESS					
CITY-ST-ZIP	RADNOR PA 19087	Dourte	1.4 CITY	_	T-ZIP			Laige	
TITLE	PANEOD MARIETANA O		2.1 1ITU			<b>€_</b> 1 ∪	hange	Addition	
NAME	250 KING OF PRUSSIA ROAD		2.2 NAM						
STREET ADDRESS	RADNOR PA 19087			2.3 STREET ADDRESS					
CITY-ST-ZIP	RADINON PA 19007				T-ZIP		hange	Addition	
TITLE	BIXLER, ROBERT	☐ Offett	3.1 TITL			L., 0	nange	L_I Addition	
NAME	250 KING OF PRUSSIA RD		3.2 NAM						
STREET ADDRESS	RADNOR PA 19087		3.3 STREET		ļ.				
CITY-ST-ZIP	VD	DELETE	3.4. C(T)		T-ZIP		hange	Addition	
TITLE	KELICAN, JAMES W	[] Dette [E	4.1 THL				แซเปร	LT ADDITION	
NAME CORET ADDRESS	250 KING OF PRUSSIA RD.		4 2 NAM		ADDOCCO				
STREET ADDRESS	RADNOR PA 19087				ADDRESS				
CITY-ST-ZIP TITLE	AS	DELETE	4.4 CITY 5.1 TITL	-	1-ZIP	П	hange	Addition	
	TAMASITIS, MARGARET		5.1 INL				nange		
NAME Proces appared	And this On anticols an				ADDDECC				
STREET ADDRESS	DADUGD DA 4000T		1	5.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	TANITOR EN 1800/			5.4 CITY-ST-ZIP 6.1 TITLE		П	hange	Addition	
NAME			6.1 HIL 6.2 NAM				панус	Audilion	
					ADDOCOC				
STREET ADDRESS					ADDRESS				
CITY_CT_7JP			EACITY	(_ CT	1.7ID				

14. I 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 if changed, or on an attachment with an address