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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(5)

FILED May 13 1998 8:00am Secretary of State

Suite, Apt. #, etc. Suite, Apt. #, etc.	d For opticable tional ed // Be ses ble
EDDYSTONE PA 19022 EDDYSTONE PA 19022 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified O4/03/1978 2. Principal Place of Business 2e. Mailing Address 4. FEI Number 23-1745638 Not A Sulfe, Apil #, etc. Sulfe, Apil #, etc. City & State City & Sta	pticable tional ed / Be es
2. Principal Place of Business 2a, Mailing Address 4. FEI Number Angli 21	pticable tional ed / Be es
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Apply 21 26 23-1745638 Not A 22 23-1745638 Not A 23-1745638 Suite, Api. #, etc. 23-1745638 Suite, Api. #, etc. 22 27 Crity & State 23 Crity & State 24 25 29 29 30 25 29 30 Election Campaign Financing S.5.00 M 26 Added to 27 Country 74 Country 8. This corporation owes or has paid the current year Intan 24 25 29 30 Personal Properly Tax due June 30. Yes Name and Address of Current Registered Agent 26 CT CORPORATION SYSTEM 1200 8. PINE ISLAND ROAD 27 PLANTATION FL 33324 81 Name 28 Street Address (P.O. Box Number is Not Acceptable) 29 Street Address (P.O. Box Number is Not Acceptable) 29 Street Address (P.O. Box Number is Not Acceptable) 29 Street Address (P.O. Box Number is Not Acceptable) 29 Street Address (P.O. Box Number is Not Acceptable) 29 Street Address (P.O. Box Number is Not Acceptable) 20 Street Address (P.O. Box Number is Not Acceptable) 20 Street Address (P.O. Box Number is Not Acceptable) 21 Street Address (P.O. Box Number is Not Acceptable) 22 Street Address (P.O. Box Number is Not Acceptable) 23 Street Address (P.O. Box Number is Not Acceptable) 24 Street Address (P.O. Box Number is Not Acceptable) 25 Street Address (P.O. Box Number is Not Acceptable) 26 Street Address (P.O. Box Number is Not Acceptable) 27 Street Address (P.O. Box Number is Not Acceptable) 28 Street Address (P.O. Box Number is Not Acceptable) 29 Street Address (P.O. Box Number is Not Acceptable) 20 Street Address (P.O. Box Number is Not Acceptable) 21 Street Address (P.O. Box Number is Not Acceptable) 22 Street Address (P.O. Box Number is Not Acceptable) 23 Street Address (P.O. Box Number is Not Acceptable) 24 Street Address (P.O. Box Number is Not Acceptable) 25 Street Address (P.O. Box Number is Not Acceptable) 26 Street Address (P.O. Box Number is Not Acceptable) 27 St	pticable tional ed / Be es
2. Principal Place of Business 2e, Mailing Address 2e Suite, Apt. #, etc. 2e Suite, Apt. #, etc. 2e Suite, Apt. #, etc. 27 City & State 2e City & State 2e City & State 3e Country 2ft	pticable tional ed / Be es
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Status Desired St	tional ed / Be es ible
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Status Desired St	ed / Be es ble
City & State City & Ci	/ Be es ble
City & State State City & State City & State Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip Country St. This corporation owes or has paid the current year Intangle Zip Zi	es ble
20 COUNTY 20 S. This corporation owes or has paid the current year Intany 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 8. PINE ISLAND ROAD PLANTATION FL 33324 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) FL 85 Zip Contribution of Sections 607 05:02 and 607 15:08, Floride Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes SIGNATURE Signature type for packed forme of rupe for day of another age of an application of the provision of Section 607,05:05, Florida Statutes 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-ZIP MAME STREET ADDRESS OTTY-ST-ZIP MILMINGTON DE 14. CITY-ST-ZIP ANSDOWNE, PA 000000 24. CITY-ST-ZIP DELETE 3. TITLE V DELETE 3. T	ble
20 COUNTY 20 S. This corporation owes or has paid the current year Intany 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 8. PINE ISLAND ROAD PLANTATION FL 33324 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) FL 85 Zip Contribution of Sections 607 05:02 and 607 15:08, Floride Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes SIGNATURE Signature type for packed forme of rupe for day of another age of an application of the provision of Section 607,05:05, Florida Statutes 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-ST-ZIP MAME STREET ADDRESS OTTY-ST-ZIP MILMINGTON DE 14. CITY-ST-ZIP ANSDOWNE, PA 000000 24. CITY-ST-ZIP DELETE 3. TITLE V DELETE 3. T	
Second Composition Second	
CT CORPORATION SYSTEM 1200 8. PINE ISLAND ROAD PLANTATION FL 33324 82 Street Address (P.O. Box Number is Not Acceptable) 83 Refer Address (P.O. Box Number is Not Acceptable) 84 City 85 City 86 City 87 City 88 City 88 City 89 Cit	
1200 \$ PINE ISLAND ROAD PLANTATION FL 33324 B2 Street Address (P.O. Box Number is Not Acceptable) B3	
PLANTATION FL 33324 83 84 City FL 85 Zip Condition of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its notifice or registered agent, or both, in the State of Horida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as regarded. It am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or profed come of rejectored agent alone left along to date. TITLE V	
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 agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent, or both, in the State of Florida Statutes agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature typed or peated name of registered agent and like it night close (Note Registered Agent signature required when reinstating) DATE	
TILE V DELETE 11 TITLE V DELETE 11 TITLE V DELETE 11 TITLE STATE OF THE PROPOSED OF THE PROPOS	f
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 rodfice 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 regarded agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or praided name of regetered agent amount if right each with the direct agent and the if right each good and the individual statutes. 12. OF ICERS AND DIRECTORS TITLE V DELETE 1.1 TITLE V JAMES PRICE Change Change TREET ADDRESS CITY-ST-ZIP WILMINGTON DE 1.4 CITY-ST-ZIP FITLE RTISERT, MARY I STREET ADDRESS CITY-ST-ZIP LANSDOWNE, PA 000000 DELETE DELETE 3.1 TITLE V Change	Э
SIGNATURE Signature typed or profess connecting to the obligations of Section 607.0508, Florida Statutes. SIGNATURE Signature typed or profess connecting to the obligations of the o	
Signature typed or product came of it go forest agent and tilk if tigs fields: NOTE Registered Agent signature required when reinstating) DATE	stered
12. OF FICERS AND DIRECTORS TITLE NAME GOHN, PETER STREET ADDRESS CITY-ST-ZIP NAME RITSERT, MARY I STREET ADDRESS CITY-ST-ZIP LANSDOWNE, PA 00000 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN INITIF V LANGE 1.1 ITILE V ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN INITIF V Change 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP AMME 2.1 TITLE V CHANGE C	
TITLE NAME GOHN, PETER STREET ADDRESS CITY-ST-ZIP NAME RITSERT, MARY I STREET ADDRESS CITY-ST-ZIP LANSDOWNE, PA 00000 DELETE 1.1 TITLE DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP LANSDOWNE, PA 00000 DELETE 3.1 TITLE Change 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP LANSDOWNE, PA 00000 DELETE 3.1 TITLE Change	112
NAME GOHN, PETER 1.2 NAME JAMES PRICE	Addition
STREET ADDRESS 2706 BODINE DR 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP MILMINGTON DE 1.5 STREET ADDRESS 1.5 STREET ADDRESS MILMINGTON DE M	
CITY-ST-ZIP	
TITLE \$ DELETE 2.1 TITLE ✓ □ Change □ NAME RITSERT, MARY I 22 NAME HANSEN, KNUD □ □ STREET ADDRESS 147 HILLDALE RD 23 STREET ADDRESS □ □ □ □ CITY-ST-ZIP LANSDOWNE, PA 00000 □	
NAME RITSERT, MARY I 22 NAME HANSEN, KNUD STREET ADDRESS 147 HILLDALE RD 23 STREET ADDRESS CITY-ST-ZIP LANSDOWNE, PA 00000 24 CITY-ST-ZIP PA TITLE V DELETE 31 TITLE S Change	Addition
STREET ADDRESS 147 HILLDALE RD 23 STREET ADDRESS CITY-ST-ZIP LANSDOWNE, PA 00000 2 4 CITY-S1-ZIP PA TITLE V DELETE 31 TITLE S Change	
CITY-ST-ZIP]
TITLE V DELETE 31 TITLE 5 Change C	
•	Addition
NAME NESTEL, JOSEPH J 32 NAME SEGAL, XLAN	
STREET ADDRESS 293 PRISCILLA LANE 3.3 STREET ADDRESS	
CITY-ST-ZIP ALDAN PA 3.4.CITY-S1-ZIP	}
	Addition
NAME HARRIS, JAMES M 4.2 NAME CERARIO, CAROLYN	
STREET ADDRESS 2900 LEESBURG DR 4.3 STREET ADDRESS	j
CITY-ST-ZIP MEMPHIS, TN 00000 4.4 CITY-ST-ZIP	ŀ
	Addition
NAME PETRIS, WILLIAM J 5.2 NAME)
STREET ADDRESS 237 FIFTH AVE 5.3 STREET ADDRESS	ŀ
CHY-ST-ZIP CHERRY HILL, NJ 00000 5.4 CHY-ST-ZIP	
NAME HAKE II, FRANK W 62 NAME	Addition
STREET ADDRESS ST PETERS RD 63 STREET ADDRESS	Addition
CITY-ST-ZIP POTTSTOWN, PA 00000 64 CITY-ST-ZIP	Addition

14. Thereby 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 supplied until freport 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 charged, or on an attachment with an address.