

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

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AND
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1997 SEP -4 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 852454 (8)

1. Corporation Name
RADNOR HIDDEN LAGOON CORPORATION

HIDDEN LAGOON

Principal Place of Business

1801 MARKET ST
PHILADELPHIA PA 19103
US

Mailing Address

1801 MARKET ST
PHILADELPHIA PA 19103-1628
US



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 04/02/1982	3a. Date of Last Report 04/09/1996
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21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 23-2201538	Applied For Not Applicable
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22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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24. Country	25. Country	29. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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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 85. Zip Code FL
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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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DINGUS, M H R 1801 MARKET ST PHILADELPHIA PA	1.1 TITLE	DIRECTOR/PRESIDENT
STREET ADDRESS		1.2 NAME	OSBURN, S. H.
CITY-ST-ZIP		1.3 STREET ADDRESS	1801 MARKET ST.
		1.4 CITY-ST-ZIP	PHILADELPHIA PA 19103
TITLE	P OSBURN, S H 501 N AQA JUPITER FL	2.1 TITLE	
STREET ADDRESS		2.2 NAME	
CITY-ST-ZIP		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TITLE	VD SZILVER, G J 1801 MARKET ST PHILADELPHIA PA	3.1 TITLE	
STREET ADDRESS		3.2 NAME	100002286221-2
CITY-ST-ZIP		3.3 STREET ADDRESS	-09/05/97--01111--001
		3.4 CITY-ST-ZIP	*****550.00 *****550.00
TITLE	VD MULHOLLAND, P A 1801 MARKET ST PHILADELPHIA PA	4.1 TITLE	
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE	S THOMAS, BROWNLIE J 1801 MARKET ST PHILADELPHIA PA	5.1 TITLE	
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE	T JONES, P M 1801 MARKET ST PHILADELPHIA PA	6.1 TITLE	
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	SCC 9-4-97

14. I do 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.

SIGNATURE: _____ APRIL 2 1997 215-977-6236

CP2E034 (9/96)