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95 MAY -1 AM 11:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995 *5/1/95*

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

*B-5720*

DOCUMENT # **855169** (9)

1. Corporation Name  
**THE NORWOOD COMPANY - SE**

Principal Place of Business Mailing Address

**530 BRANDYWINE PARKWAY  
W. CHESTER PA 19380** **530 BRANDYWINE PARKWAY  
W. CHESTER PA 19380**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **12/31/1982** 3a. Date of Last Report **03/28/1994**

4. FEI Number **22-2066074** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

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

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City **FL** B5 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE **C**

NAME **REICHERT, JOSEPH M.**

STREET ADDRESS **530 BRANDYWINE PARKWAY**

CITY - ST - ZIP **W. CHESTER PA**

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TITLE **T**

NAME **ZOLYAK, JOHN W.**

STREET ADDRESS **530 BRANDYWINE PARKWAY**

CITY - ST - ZIP **W. CHESTER PA**

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TITLE **S**

NAME **POLISHUK, ARTHUR J.**

STREET ADDRESS **530 BRANDYWINE PKWY.**

CITY - ST - ZIP **W. CHESTER PA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P**  Change  Addition

1.2 NAME **Farrell, John E.**

1.3 STREET ADDRESS **530 Brandywine Parkway**

1.4 CITY - ST - ZIP **W. Chester PA**

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2.1 TITLE **V**  Change  Addition

2.2 NAME **Zolyak, John W.**

2.3 STREET ADDRESS **530 Brandywine Parkway**

2.4 CITY - ST - ZIP **W. Chester PA**

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3.1 TITLE **V**  Change  Addition

3.2 NAME **Polishuk, Arthur J.**

3.3 STREET ADDRESS **530 Brandywine Parkway**

3.4 CITY - ST - ZIP **W. Chester PA**

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4.1 TITLE **V**  Change  Addition

4.2 NAME **Holstetter Clarence A.**

4.3 STREET ADDRESS **530 Brandywine Parkway**

4.4 CITY - ST - ZIP **W. Chester PA**

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5.1 TITLE **V**  Change  Addition

5.2 NAME **Meagher Tom J.**

5.3 STREET ADDRESS **530 Brandywine Parkway**

5.4 CITY - ST - ZIP **W. Chester PA**

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6.1 TITLE **V**  Change  Addition

6.2 NAME **Kay, Lorraine M.**

6.3 STREET ADDRESS **530 Brandywine Parkway**

6.4 CITY - ST - ZIP **W. Chester PA**

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 E. Farrell* Vice President  
Signature, typed or printed name of signing officer or director