

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 16 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 855169 (9)
 1. Corporation Name
 THE NORWOOD COMPANY - SE



Principal Place of Business: 530 BRANDYWINE PARKWAY W. CHESTER PA 19380
 Mailing Address: 530 BRANDYWINE PARKWAY W. CHESTER PA 19380

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/31/1982	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 22-2066074	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FARRELL, JOHN E	1.2 NAME	
STREET ADDRESS	530 BRANDYWINE PARKWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	W. CHESTER PA	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZOLYAK, JOHN W.	2.2 NAME	BROWNETT, HERBERT
STREET ADDRESS	530 BRANDYWINE PARKWAY	2.3 STREET ADDRESS	530 BRANDYWINE PARKWAY
CITY-ST-ZIP	W. CHESTER PA	2.4 CITY-ST-ZIP	WEST CHESTER, PA 19380
TITLE	V	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POLISHUK, ARTHUR J.	3.2 NAME	V, S
STREET ADDRESS	530 BRANDYWINE PKWY.	3.3 STREET ADDRESS	
CITY-ST-ZIP	W. CHESTER PA	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOFSTETTER, CLARENCE A	4.2 NAME	
STREET ADDRESS	530 BRANDYWINE PARKWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	W. CHESTER PA	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEAGHER, TOM J	5.2 NAME	
STREET ADDRESS	530 BRANDYWINE PARKWAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	W. CHESTER PA	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PREGO, JOSEPH D.	6.2 NAME	
STREET ADDRESS	530 BRANDYWINE PKWY	6.3 STREET ADDRESS	
CITY-ST-ZIP	W CHESTER PA	6.4 CITY-ST-ZIP	

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.

SIGNATURE: *[Signature]* 7/8/98 610-431-3500

CR2E034 (5/98)