FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F93000003401 (7)**

1. Corporation Name
RTC SUPPLY, INC.

Principal Place of Business	Mailing Address
1180 WEST SWEDESFORD RD. SUITE 300. BLDG 2 BERWYN PA 19312	1180 WEST SWEDESFORD RD. SUITE 300. BLDG 2 BERWYN PA 19312

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/26/1993
3a. Date of Last Report: 03/24/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24 Country — 25
Zip — 29 Country — 30

4. FEI Number: 23-2702991 ☐ 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

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	Chairman & Chief Executive Officer ☐ Change ☒ Addition
NAME	MAYER, ROBERT L JR.	12 NAME	Michael R Walker
STREET ADDRESS	1180 WEST SWEDESFORD RD, STE. 300, BLDG. 2	13 STREET ADDRESS	1180 W Swedesford Rd, STE 300, BLDG 2
CITY-ST-ZIP	BERWYN PA 19312	14 CITY-ST-ZIP	Berwyn, PA 19312
TITLE	VSTD	21 TITLE	Vice President of Development ☐ Change ☒ Addition
NAME	JANSEN, FREDERICK C	22 NAME	John A. Chambers
STREET ADDRESS	1180 WEST SWEDESFORD RD, STE. 300, BLDG. 2	23 STREET ADDRESS	1180 W. Swedesford Rd, STE 300, BLDG 2.
CITY-ST-ZIP	BERWYN PA 19312	24 CITY-ST-ZIP	Berwyn, PA 19312
TITLE	D	31 TITLE	Vice President of Finance ☐ Change ☒ Addition
NAME	HIGGINS, ROBERT F	32 NAME	Ronald H. Rogers, JR.
STREET ADDRESS	1 INTERNATIONAL PLACE, 21ST FLOOR	33 STREET ADDRESS	1180 W. Swedesford Rd, STE 300, BLDG 2.
CITY-ST-ZIP	BOSTON MA 02110	34 CITY-ST-ZIP	Berwyn, PA 19312
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	EVANS, BRUCE R	42 NAME	
STREET ADDRESS	ONE BOSTON PLACE	43 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA 02108	44 CITY-ST-ZIP	
TITLE	V	51 TITLE	☐ Change ☐ Addition
NAME	BEDNAR, BARBARA	52 NAME	
STREET ADDRESS	1180 WEST SWEDESFORD RD. STE 300-2	53 STREET ADDRESS	
CITY-ST-ZIP	BERWYN PA	54 CITY-ST-ZIP	
~~TITLE~~	~~S~~	61 TITLE	☐ Change ☐ Addition
~~NAME~~	~~DUKE, MICHAEL C.~~	62 NAME	
~~STREET ADDRESS~~	~~1180 WEST SWEDESFORD RD., STE 300-2~~	63 STREET ADDRESS	
~~CITY-ST-ZIP~~	~~BERWYN PA~~	64 CITY-ST-ZIP	

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)(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: Keith W. Jones 4/28/95 (610) 644-4796
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0474100 FP