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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F9400000561 (0) **DOCUMENT** #

NSI MANAGEMENT OF DELAWARE, INC.

FILED May 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			I INBUING INCH	n inneringe eiste dater grant nacht ander Knith dater dater dater deite Bring Bring 1766 (04)				
410 HORSHAM RD 410 HORSHAM RD								
HORSHAM PA 19044		HORSHAM PA 19044			OO NOT WESTERN THE	2.004.00		
US		US		3. Date Incorporate	OO NOT WRITE IN THIS	SPACE		
				02/04/1994	d or Quained			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number		I IA	oplied For	
21 200	Welsh Road	26 202 Wels	h Rrad	36-392969	5		ot Applicable	
Suite, Apt.	#, etc	Suite, Apt #, etc.					Additional	
27				5. Certificate of Stat	us Desired 🔲	-	equired	
City & State City & State			\sim	6. Election Campaig	gn Financing	\$5.00	May Be	
23 Hors	sham TH	28 HORSHAM	171	Trust Fund Contri	bution	Added		
Tip A	Country	7m 2m	Country	8. This corporation	owes or has paid the o	urrent year Int	angible	
24 IYD	HH [25] UD	29 19044 3	<u> </u>		y Tax due June 30.] No	
	9. Name and Address of Current	t Registered Agent	81 Nan	T-17:00	ess of New Registered	J Agent		
C T CORPORATION SYSTEM				81 Name				
1200 S. PINE ISLAND RD.				82 Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324			83					
			83					
			84 City			85 7ip	Code	
44 0		1000 1100 1			FI			
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State i m familiar with, and accept the obliga	r and 607 1508, Florida Statutes of Florida. Such change was aut	, the above-name thorized by the c	ed corporation submits this stat orporation's board of directors	ement for the purpose I hereby accept the ar	of changing it pointment as	s registered registered	
agent. I a	m familiar with, and accept the obliga	tions of Section 607.0505, Florid	da Statutes.	•	3	,	,	
SIGNATURE	Signature type for professioneral requirementaries		. — . —	ute required when reinstatug)				
12.	OFFICERS AND		13.		GES TO OFFICERS AN	ID DIRPCTOR	S IN 12	
TIFLE	PCEO	DELLETE	1 UTILE	CEO	IGEO TO OTTIOETIO AT	Change	Addition	
NAME	HEISLEY, MICHEAL E		1.2 NAME	1 223				
STREET ADDRESS	410 HORSHAM ROAD		1.3 STREET ADDRES	s 202 Welsh F	Road			
CITY-ST-ZIP	HORSHAM PA		1 4 CiTY - ST - ZiP	Horsham Pa		,		
TITLE	<u> </u>	DELETE	21 TILLE	President		Change	Addition	
NAME	HAVESON, BRIAN		2.2 NAME	Fresident			-	
STREET ADDRESS	410 HORSHAM RD.		23 STREET ADDRES	202 Welsh 7	Road			
CITY-ST-ZIP	HORSHAM PA 19044		2 4 CITY - ST - ZIP	Horsham Pi	9 19044	/		
TITLE	V	☐ DELETE	3 1 TITLE		<u></u>	Change	Addition	
NAME	MATTICK, THOMAS		3 2 NAME					
STREET ADDRESS	410 HORSHAM ROAD		3 3 STREET ADDRES	: 202 Welsh F	Road			
CITY-ST-ZIP	HORSHAM PA		3 4. CITY - ST - ZIP		19044	/		
TITLE	AS	☐ DELETE	4.1 TITLE	Secretary		Change	Addition	
NAME	MEADOWS, STANLEY		4. 2 NAME		•			
STREET ADDRESS	410 HORSHAM ROAD		4.3 STREET ADDRESS	1 202 Welsh F	⊰oad .			
CITY-ST-ZIP	HORSHAM FL		4 4 CITY-ST-ZIP	Horsham F	A 19044			
TITLE	AS	□ belete	5.1 TILLE			Change	Addition	
NAME	BERGNER, DENISE		5.2 NAME	0-0 (1) 13	المعاد			
STREET ADDRESS	410 HORSHAM ROAD		5 3 STREET ADDRESS					
CTTY-ST-ZIP	HORSHAM PA		5 4 C(1 Y - ST - Z(P	Horsham Pr	3 190HH.	. <u> </u>		
TITLE	SGC	DELETE	6 1 TITLE			☐ Change	Addition	
NAME	ROSEN, JOEL D		6 2 NAME				ļ	
STREET ADDRESS	410 HORSHAM ROAD		6 3 STREET ADDRESS	3				
CMY-ST-ZIP	HORSHAM PA	·	64 CITY-ST-ZIP	<u></u>				
34 I horoby c	artify that the information remoleced with	he three filmer closes not enable for t	he exemption at	tod in Castion 110 07/21/9 Flor	dala Ctatutaa I fustina a	a - 1:4 . At - 4 th -		

indicated on this annual report or supplied with this introduced to exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 graphwered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on an attachment with a produces.