PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name F96000002514

LFC POWER SYSTEMS CORPORATION

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05-17-1999 90100 034 ***150.00

Principal Place	of Business	Maiting Address	-	~	() And the case again again again again again		inge light after rate
204D WELDIN 3411 SILVERSID WILMINGTON DI US		204D WELDIN 3411 SILVERSIDE RD. WILMINGTON DE 19810 US			DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed 05/20/1996	SPACE	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21 3 Radr	or Corp.Center	26 3 Radnor Co	rp.Cent	ter	51-0331356		Not Applicable
Suite, Apt. 400		Suite, Apt. #, etc. 27			5. Certificate of Status Desired		5 Additional Required
City & State		City & State			6. Election Campaign Financing)0 May Be
23 Radnor		28 Radnor, PA			Trust Fund Contribution		ed to Fees
Zip 10007	Country	zip 29 19087-8760	Country 30		This corporation owes the current year Int Personal Property Tax.	angible Yes	XXNo
24 19087-	-8760 25 9. Name and Address of Current	1	30		10. Name and Address of New Registered		A3110
	3. Haile and Address of Current	registered Agent	81	Name			<i></i>
СТ	CORPORATION SYSTEM						
	SOUTH PINE ISLAND ROAD		82	Street	Address (P.O. Box Number is Not Acceptable)		
1	ITATION FL 33324		83				-
						105 7	- Codo
			84	City	FL	85 Z	ip Code
I office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	i Florida. Such change was ai	uthorized by	the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appoi	changing ntment as	its registered registered
					<u> </u>		
	Signature, typed or printed name of registered agent a			t signature r	equired when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	ID DIREC	CTORS IN 12
12.	OFFICERS AND	DIRECTORS	13.	it signature r	ADDITIONS/CHANGES TO OFFICERS AN	ID DIREC	
12.	OFFICERS AND		13.	it signature r			
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 only an attact ment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.2 NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

A REQUIPANTE M. Howley

5/01/99

3 Radnor Corporate Center, #400 Radnor, PA 19087-8760

GARY R. DiLELLA

610-964-2000

Daytime Phone #