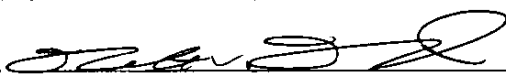


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 16, 2005 8:00 am
Secretary of State

05-16-2005 90040 011 ****50.00

DOCUMENT # M01000001889 1. Entity Name RADIAN SERVICES LLC					
Principal Place of Business 1601 MARKET STREET PHILADELPHIA, PA 19103-2337			Mailing Address 1601 MARKET STREET PHILADELPHIA, PA 19103-2337		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip Country		Zip Country			
4. FEI Number 23-1936987		Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				04252005 Chg-LLC CR2E083 (10/03)	
6. Name and Address of Current Registered Agent KARLEN, SUSAN 1419 HOLLEMAN DRIVE VALRICO, FL 33594			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KASMAR, ROY J 18 HARRISON LANE NEWTOWN SQUARE, PA 19073	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Tami Bohm 1601 Market Street Philadelphia, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP QUINT, C. ROBERT 15 PIKES WAY CHELTENHAM, PA 19012	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP YARUSS, HOWARD S 80 CENTRAL PARK WEST NEW YORK, NY 10023	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RADICIONI, ROBERT 3033 ARROW HEAD LANE PLYMOUTH MEETING, PA 19462	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LATIMER, TERRY 909 PINE VIEW DRIVE WEST CHESTER, PA 19380	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 				Date 4/28/05 Daytime Phone #	