

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2002 8:00 am
Secretary of State

02-14-2002 90046 028 ***150.00

DOCUMENT # P01516

1. Entity Name
RADNOR/PLANTATION CORPORATION

Principal Place of Business
1801 MARKET ST
PHILADELPHIA PA 19103
US

Mailing Address
1801 MARKET ST
PHILADELPHIA PA 19103
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-2292398

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	S	<input type="checkbox"/> Delete
NAME	GERNER, E.C.	
STREET ADDRESS	1801 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE	PDT	<input type="checkbox"/> Delete
NAME	MULHOLLAND, P. A.	
STREET ADDRESS	1801 MARKET ST	
CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE	AVP	<input type="checkbox"/> Delete
NAME	HANISCH, RUDOLF	
STREET ADDRESS	1801 MARKET STREET	
CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE	AS	<input type="checkbox"/> Delete
NAME	FRITSCH, JUDITH A	
STREET ADDRESS	1801 MARKET STREET	
CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE	ASAT	<input type="checkbox"/> Delete
NAME	MCKEEVER, JOHN J	
STREET ADDRESS	1801 MARKET STREET	
CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Remove Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NPT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	George J. Szulier	
STREET ADDRESS	1801 Market Street	
CITY-ST-ZIP	Philadelphia PA 19103	

13. 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 or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/02

Date

215-977-6648

Daytime Phone #

CR2E034 (9/01)