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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P09749

RADNOR/EDGEWATER, INC.

j					
Principal Place	e of Business	Mailing Address		1 (101198) (1) 00119 (011 1011)	0.61. 4121. 6161. 4121. 6161. 1621
1901 MARKET ST 1801 MARKET ST					
PHILADELPHIA PA 19103 PHILADELPHIA PA 19103			DO NOT WRITE IN TH	IS SPACE	
US		ŲS		3. Date Incorporated or Qualifed	
				04/15/1986	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		23-2402273	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year !	ntangible Yes □No
24	25		30	Personal Property Tax. 10. Name and Address of New Registere	
	9. Name and Address of Curren	it Registered Agent	81 Name	10. Name and Address of New Registers	<u> </u>
CT CORPORATION SYSTEM			L		
1200 S. PINE ISLAND ROAD			82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324			83		
1					
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statuter	s, the above-named co	progration submits this statement for the purpose	of changing its registered
) office or r	registered agent, or both, in the State im familiar with, and accept the obligation	of Florida. Such change was aut	inorized by the corpora	ation's board of directors. I hereby accept the app	ointment as registered
1	im familiar with, and accept the obliga	Allons of, Section 607.0505, Florid	da Statutes.		}
SIGNATURE	Signature, typed or printed name of registered agei	nt and title if applicable. (NOTE: f	Registered Agent signature requ	ured when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	MULHOLLAND, P. A.		1.2 NAME		
STREET ADDRESS	1801 MARKET ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19103		1.4 CITY-ST-ZIP		
TITLE	v	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HANISH, R		2.2 NAME		
STREET ADDRESS	100		2.3 STREET ADDRESS		i
C(TY-ST-Z)P	PHILADELPHIA PA 19103		2. 4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	S	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GERNER, E.C.		3.2 NAME		
STREET ADDRESS	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3.3 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19103	□ DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	TD	☐ DELETE	4.1 TITLE		
NAME	JONES, P M		4. 2 NAME		
STREET ADDRESS	1001 112 413 21 01		4.3 STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19103	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	ASSISTANA SPERETARA	Change Addition
TITLE		□ perdie	5.2 NAME	JUDITAN SERETARY	7
NAME			5.3 STREET ADDRESS	801 MARKET STREET	
STREET ADDRESS	il .		3.5 ST. SELL ADDITION	OUT THE PARTY OF T	

19/03 14. 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 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 wittly an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

STREAT

1801 Munket

Philadelphia

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90104 008 ***150.00

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Addition