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 # P14942

Corporation Name

RADNOR/GRAND OAKS CORPORATION

HAUNUH	GHAND OAKS CORPORAT	IUN			
Principal Place	of Business	Mailing Address			
1801 MARKET ST 1801 MARKET ST PHILADELPHIA PA 19103 PHILADELPHIA PA 19103					DO NOT WORT IN THE COACE
US US					DO NOT WRITE IN THIS SPACE
					3. Date incorporated or Qualifed
		1 2- 11/9: 11/			06/23/1987 4. FEi Number Applied For
2. Principal Place of Business 2a. Mailing Address					
21 26			,		23-2466230 Not Applicable \$8.75 Additional
22 27					5. Certificate of Status Desired Fee Required
City & State City & State					6. Election Campaign Financing S5.00 May Be
28					Trust Fund Contribution Added to Fees
Zip	Country				8. This corporation owes the current year Intangible
24	25	29	30		Personal Property Tax. Yes □No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
CT CORPORATION SYSTEM			82	Street A	Address (P.O. Box Number is Not Acceptable)
1200 S. PINE ISLAND ROAD					
PLAN	ITATION FL 33324		83		
			84	City	85 Zip Code
				•	FL 0 1 1 1 1 1 1 1 1 1
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I as	n familiar with, and accept the obligation	tions of, Section 607.0505, Florid	da Statutes.		• • •
SIGNATURE					equired when reinstating) OATE
12.	Signature, typed or printed name of registered ager	D DIRECTORS	13.	t signature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	S	DELETE	1.1 TITLE		Change Addition
NAME	GERNER, E.C.		1.2 NAME		
STREET ADDRESS	Annual Statement Off		1.3 STREET	ADDRESS	
CITY-ST-ZIP			1.4 CITY-ST	- 1	
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HANISH, R		2.2 NAME		
STREET ADDRESS	1801 MARKET ST		2.3 STREET ADD		
CITY-ST-ZIP	PHILADELPHIA PA 19103	9103		T-ZiP	
TITLE	PD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MULHOLLAND, P.A.		3.2 NAME		·
STREET ADDRESS	1801 MARKET ST		3.3 STREET	ADDRESS	
C/TY-ST-Z/P	PHILADELPHIA PA 19103		3.4. CITY-S	T-ZIP	
TITLE	TD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	JONES, P.M.		4. 2 NAME		
STREET ADDRESS	1801 MARKET ST		4.3 STREET	ADDRESS	
CITY-ST-ZIP	PHILADELPHIA PA 19103		4.4 CITY-ST	r-ZiP	Ancient long tra
TITLE		☐ DELETE	5.1 TITLE		ASSISTANT SECRETARY Change Addition
NAME			5.2 NAME		Supir Market Street
STREET ADDRESS			5.3 STREET	1	la caci Accompa
CITY-ST-ZIP		[] oc. etc	5.4 CITY-ST 6.1 TITLE	I - ZIP	Ph) (Adelphia, 1/2 19163 ASSISTANT SORRESTREE + SIGNIFICATION Change Staddition
TITLE		[] DELETE		Ì	ASSISTANT SOCRATERY of ASSISTANT TRANSPORT Change Addition
NAME			62 NAME		John J. Mc Reeven Marker 1801 MARKET STREET
STREET ADDRESS			6.3 STREET	AUUKESS	1801 I MAILURY SYLVRY

1903

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0f(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 with an address, with all other like empowered.

SIGNATURE: ELLY COMPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LACRETAR 2/18/99

015-977-66 48

Daytime Phone #

(SELL) #5017Y

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90104 009 ***150.00