## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## P14942 DOCUMENT #

1. Entity Name

## RADNOR/GRAND OAKS CORPORATION



## **FILED** Feb 10, 2003 8:00 am Secretary of State 02-10-2003 90145 015 \*\*\*150.00

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						# 1131 31911 BIB		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State				City & State				<b>4.</b> F	El Number 23-2466230		-	pplied For ot Applicable
Zip	Zip Country			Zip Counti						8.75 Ad ee Require		
	6. Name	and Address of Current	Registere	d Agent		'	7. N	lame and Address of New R	egistered A	gent		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD						Name Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324											Zip Cod	de
										FL		
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 .	Signature, typed	or printed name of registered agent a	and title if app	licable. (NOTE	: Registere	d Agent signati	ure required v	when rei	instating)	DATE		<del></del>
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								-	Election Campaign Fir Trust Fund Contributio			00 May Be ed to Fees
10.	•	OFFICERS AND						AD.	L DITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 11
TITLE	e	1		Delete	TITLE		A3		$\mathcal{L}_{\alpha}$		K Change	☐ Addition
NAME STREET ADDRESS	GERNER, 1801 MAF					et address -st-zip	GERL 1801 : Phila	IER. Mai Ido	, E.C. RKet st., 17 <sup>m</sup> yPhia, PA 191	Floor 03	-	
TITLE NAME	AV HANISCH			Delete	TITLE	E	<				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	1801 MARKET ST PHILADELPHIA PA 19103					ET ADDRESS - ST-ZIP	1801	mr ad:	lo, L.J. Arket st., 17M elphia, PA 19	1103		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MULHOLL 1801 MAF	and, p.a. Ket st		☐ Delete		•			, ,		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS	AS FRITSCH, 1801 MAF	PHIA PA 19103 JUDITH A KET STREET		<b>⊠</b> Delete	TITLI NAM STRE						☐ Change	☐ Addition
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	ASAT MCKEEVE 1801 MAF	PHIA PA 19103  R, JOHN J  RKET STREET		Delete	TITLI NAM STRE						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT SZILIER, ( 1801 MAF	PHIA PA 19103 GEORGE J KKET STREET PHIA PA 19103		☐ Delete	TITLI NAM STRE	<u> </u>					☐ Change	Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOTTE ATTENDED TO SIGNATURE: