

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 10:10

DOCUMENT # **P16815** (3)

1. Corporation Name
RADNOR/ARGYLE CORPORATION

Principal Place of Business Mailing Address
1801 MARKET ST PHILADELPHIA PA 19103 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **11/16/1987** 3a. Date of Last Report **03/15/1994**
4. FEI Number **23-2483551** Applied For Not Applicable

2. Principal Place of Business 2b. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 25 28 Zip 29 Country 30

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Signature must be in ink and must be of the registered agent or the applicable registered agent. (NOTE: Registered Agent signature required when registering.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DINGUS, M.H.R.	1.2 NAME	
STREET ADDRESS	1801 MARKET ST	1.3 STREET ADDRESS	
CITY, ST, ZIP	PHILADELPHIA PA	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWNLIE, THOMAS, JR.	2.2 NAME	
STREET ADDRESS	1801 MARKET ST	2.3 STREET ADDRESS	
CITY, ST, ZIP	PHILADELPHIA PA	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SZILIER, G.J.	3.2 NAME	
STREET ADDRESS	1801 MARKET S	3.3 STREET ADDRESS	
CITY, ST, ZIP	PHILADELPHIA PA	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSBURN, S. H	4.2 NAME	
STREET ADDRESS	501 N AIA	4.3 STREET ADDRESS	
CITY, ST, ZIP	JUPITER FL	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULHOLLAND, P.A.	5.2 NAME	
STREET ADDRESS	1801 MARKET ST	5.3 STREET ADDRESS	
CITY, ST, ZIP	PHILADELPHIA PA	5.4 CITY-ST-ZIP	
TITLE	T	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, P. M	6.2 NAME	
STREET ADDRESS	1801 MARKET ST	6.3 STREET ADDRESS	
CITY, ST, ZIP	PHILADELPHIA PA	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 on Block 12 or Block 13 of changes or on an attachment with an address.

SIGNATURE: *Thomas Brownlie, Jr.* **THOMAS BROWNLIE, JR.** FEB. 2, 1995 245-977-6236
(Signature and typed or printed name of signing officer or director)