

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P16850

(0)

1. Corporation Name

THE BRANDYWINE GROUP, INC.

Principal Place of Business

BRANDYWINE ONE, SUITE 300
P.O. BOX 500
CHADDS FORD PA 19317

Mailing Address

BRANDYWINE ONE, SUITE 300
P.O. BOX 500
CHADDS FORD PA 19317

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

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

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 607.1146, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent 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 607.0502, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY, ST, ZIP	TITLE
TDP			
NAME	MOORE, BRUCE E.		
STREET ADDRESS	BRANDYWINE I, SUITE 300		
CITY, ST, ZIP	CHADDS FORD PA		
TITLE	DSV		
NAME	GIOVINCO, PHILLIP C.		
STREET ADDRESS	BRANDYWINE I, SUITE 300		
CITY, ST, ZIP	CHADDS FORD PA		
TITLE	P		
NAME	HAYES, WILLIAM T.		
STREET ADDRESS	BRANDYWINE I, SUITE 300		
CITY, ST, ZIP	CHADDS FORD PA		
TITLE	V		
NAME	RUSSO, JACK J.		
STREET ADDRESS	BRANDYWINE I, SUITE 300		
CITY, ST, ZIP	CHADDS FORD PA		
TITLE	V		
NAME	CHERRY, KEITH		
STREET ADDRESS	BRANDYWINE I, SUITE 300		
CITY, ST, ZIP	CHADDS FORD PA		
TITLE			
NAME			
STREET ADDRESS			
CITY, ST, ZIP			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	STREET ADDRESS	CITY, ST, ZIP	TITLE	Change	Addition
1 NAME					
12 NAME					
13 STREET ADDRESS					
14 CITY, ST, ZIP					
15 TITLE					
2 NAME					
24 STREET ADDRESS					
25 CITY, ST, ZIP					
3 NAME					
33 STREET ADDRESS					
34 CITY, ST, ZIP					
4 NAME					
43 STREET ADDRESS					
44 CITY, ST, ZIP					
5 NAME					
53 STREET ADDRESS					
54 CITY, ST, ZIP					
6 NAME					
63 STREET ADDRESS					
64 CITY, ST, ZIP					

14. I do hereby certify that the information supplied with this filing is voluntary, true and correct, and does not qualify for the exemption stated in Section 119.07(3)(k), 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 owner 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 checked, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bruce E. Moore

FEB 20 1996

(610) 358-4000



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****208.75 ****208.75

3. Date Incorporated or Qualified	3a. Date of Last Report
12/22/1987	03/31/1995
4. FFI Number	Applied For
23-2388504	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☒	
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	☐
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☐ No
10. Name and Address of New Registered Agent	

CR2E034 (12/95)