


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P17025</b>	
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1. Entity Name  
RADNOR/WILLOUGHBY CORPORATION

Principal Place of Business  
1801 MARKET ST  
PHILADELPHIA, PA 19103 US

Mailing Address  
1801 MARKET ST  
17TH FLOOR  
PHILADELPHIA, PA 19103 US



01082004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 23-2487658	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE  
IN THIS SPACE**

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

1100000094955  
03/24/04-90013-010 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MULHOLLAND, P.A. 1801 MARKET ST PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS GERNER, E.C. 1801 MARKET ST., 17TH FL PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DILUCIDO, L. J. 1801 MARKET ST., 17TH FL PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ASAT MCKEEVER, JOHN J 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT SZILIER, GEORGE J 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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: L. J. Dilucido, Secretary  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-04 215-977-6236  
Date Daytime Phone #