

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 10, 2003 8:00 am**  
**Secretary of State**

02-10-2003 90145 013 \*\*\*150.00

**DOCUMENT # P18753**

1. Entity Name  
**RADNOR/LAKESIDE CORPORATION**



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  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
4. FEI Number **23-2505236**  
Applied For  
Not Applicable

Zip Country Zip Country  
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**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	AS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERNER, E.C.		NAME	GERNER, E.C.	
STREET ADDRESS	1801 MARKET ST		STREET ADDRESS	1801 MARKET ST, 17 <sup>th</sup> FLOOR	
CITY-ST-ZIP	PHILADELPHIA PA 19103		CITY-ST-ZIP	PHILADELPHIA PA 19103	
TITLE	PD	<input type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MULHOLLAND, P A		NAME	Delucido, L.J.	
STREET ADDRESS	1801 MARKET ST		STREET ADDRESS	1801 MARKET ST, 17 <sup>th</sup> FLOOR	
CITY-ST-ZIP	PHILADELPHIA PA 19103		CITY-ST-ZIP	PHILADELPHIA, PA 19103	
TITLE	AV	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANISCH, RUDOLF		NAME		
STREET ADDRESS	1801 MARKET STREET		STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19103		CITY-ST-ZIP		
TITLE	AS	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRITSCH, JUDITH A		NAME		
STREET ADDRESS	1801 MARKET STREET		STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19103		CITY-ST-ZIP		
TITLE	ASAT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCKEEVER, JOHN J		NAME		
STREET ADDRESS	1801 MARKET STREET		STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19103		CITY-ST-ZIP		
TITLE	VPT	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SZILIER, GEORGE J		NAME		
STREET ADDRESS	1801 MARKET STREET		STREET ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA 19103		CITY-ST-ZIP		

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:** *George J Szilier* **REQUIRED** 1-23-03 915-977-6236  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)