


2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P21840 1. Entity Name LAUREL OAK REALTY CORPORATION	
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Principal Place of Business 1801 MARKET STREET, 17TH FLOOR PHILADELPHIA, PA 19103 US	Mailing Address 1801 MARKET STREET, 17TH FLOOR PHILADELPHIA, PA 19103 US
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DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number 23-2533524	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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

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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. <input type="checkbox"/> \$5.00 May Be Added to Fees	1000000034344 12/24/04-20013-005 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MULHOLLAND, PAUL A TEN PENN CENTER, 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT SZILIER, GEORGE J TEN PENN CENTER, 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP SHERRILL, WILLIAM A TEN PENN CENTER, 1801 MARKET STREET PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GERNER, ELRIC C 1801 MARKET ST 17TH FLOOR PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DILUCIDO, LORRIE 1801 MARKET ST 17TH FLOOR PHILADELPHIA, PA 19103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 **3-12-04** **215-977-6236**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #