FILE NOW: FILING FEE AFTER MAY 1 IS \$22
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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Scoretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation Name

DOCUMENT #

P22139

(0)

DADMOD	CHINCOACT	CORPORATION	
	SHNCOAST	CURPURATION	

RADNOR SUNCOAST CORPORATION					1 16 1/18 10 11 11 11 11 11 11 11 11 11 11 11 11			
Principal Place of	Business	Mailing Address			f Metter in iner uner mere	11119 1911 914		
1801 MARKET		1801 MARKET ST PHILADELPHIA PA 191	103					
PHILADELPHI	A PA 19103	US			3. Date Incorporated or Qualified	3a. Date	of Last Report	
US					12/15/1988		02/22/1995	
					4. FEI Number		Applied For	
2. Principal Place	of Business	2a. Mailing Address			23-2536200		Not Applicable	
21		26	., -		5. Certificate of Status Desired	П	\$8.75 Additional Fee Required	
Suite, Apt. #.	EIC.	27		_				
22 Ct & Ctata		City & State			6. Election Campaign Financing		\$5.00 May Be Added to Fees	
City & State		28			Trust Fund Contribution			
Zip	Country	Zip	Counti	У	8. This corporation has liability for	rintangible ta s ∐No	ax under s 199.002,	
24	25	29	30		10. Name and Address of New	Penistered	Agent	
24	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New	Hegistoriae		
			8	1 Name				
CT COI	DOODATION SYSTEM		8	2 Street Ad	dress (P.O. Box Number is Not Accepta	able)		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD								
1200 5	TION FL 33324		\e	3				
PLANIA	(IIUN FL 33324		ŀã	4 City		FL	85 Zip Code	
ì			1	·			its registered office	
11. Pursuant to or registere familiar with	the provisions of Sections 607.0 d agent, or both, in the State of , and accept the obligations of,	Section 607.0505, Horida Statutes	i		oration submits this statement for the paard of directors. I hereby accept the ap		s registered agent. I am	
SIGNATURE _	Ignature, typied or printed name of registered	Lagrotane breitanglicable (NO	ITE Bug Vere 1A	g ne signature rem	reductor renshitings ADDITIONS/CHANGES TO C	DATE	ID DIRECTORS IN 12	
12.	OFFICERS	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO C	FFICENS AI	Change Addition	
TITLE		☐ DELETE	1.107	l.E			□ outriga □ □ outri	
NAME	DINGUS, M.H.R.		1.2 NA	ИE				
STREET ADDRESS	1801 MARKET ST		1.3 \$16	EET ADDRESS				
k	PHILADELPHIA PA		1.4.011	y SI-ZIP			Change Addition	
CHTY-ST-ZIP TITLE	P	☐ DELETE	2 1 Til	LE				
1	OSBURN, S. H		2.2 NA	ME				
NAME	501 N AIA		2351	REET ADDRESS				
STREET ADDRESS			2.4 CI	Y S1-ZIP			☐ Change ☐ Addition	
CHY-ST-ZIP	JUPITER FL	DELETE	3 1 1	TLE			C change C Augmon	
TITLE	VD		3.2 No	MÉ				
NAME	MULHOLLAND, P.A.		33 \$	THEET ADDRESS				
STREET ACIDRESS	1801 MARKET ST		340	TY-ST-ZIF			☐ Change ☐ Addition	
CITY-ST-ZIP	PHILADELPHIA PA	DELETE	4 1 1	ile			Change Addition	
TITLE	VD	<u> </u>	4 2 N	AME .				
NAME	SZILIER, G.J.		120	DESTANDANCE				

CITY-S1-ZIP PHILADELPHIA PA

14. I do hereby certify that the information supplied with this fling is voluntarily furnished 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 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 certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 697, Florida Statutes; and that my name appears in Block 12 or Florida Statutes.

4.3 STREET ADDRESS

5 3 STREET ADDRESS

6.3 STREET AUDRESS

5.4 CHTY - ST - ZIP

5 1 TITLE

5.2 NAME

6 1 THE

€ 2 NAME

DELETE

DELETE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

CITY - ST - ZIP

TITLE

NAME

TITLE

NAME

1801 MARKET ST

PHILADELPHIA PA

1801 MARKET ST

PHILADELPHIA PA

JONES, P. M

BROWNLIE, THOMAS, JR.

Change

Change

Addition

☐ Addition