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Apr 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 820917 (3)

1. Corporation Name
PHILADELPHIA LIFE ASSET PLANNING COMPANY

Principal Place of Business
400 MARKET STREET, 11TH FLOOR
PHILADELPHIA PA 19106

Mailing Address
400 MARKET STREET, 11TH FLOOR
PHILADELPHIA PA 19106-2585



2. Principal Place of Business
21 11815 N. Pennsylvania St.
Suite, Apt. #, etc.
22
City & State
23 Carmel, IN
Zip Country
24 46032 25 USA

2a. Mailing Address
26 11815 N. Pennsylvania St.
Suite, Apt. #, etc.
27
City & State
28 Carmel, IN
Zip Country
29 46032 30 USA

3. Date Incorporated or Qualified
05/01/1967

3a. Date of Last Report
04/27/1996

4. FEI Number
23-1680888

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 607.0505, Florida Statutes.

SIGNATURE

Signature not typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
S	NEWSTEIN, MAXINE	363 COUNTRY LANE	KING OF PRUSSIA, PA1	<input checked="" type="checkbox"/>
VD	LUZETTI, KENNETH G.	7619 S FILLMORE WAY	LITTLETON CO	<input checked="" type="checkbox"/>
PTD	CARPEL, KENNETH R	554 N 23RD STREET	PHILADELPHIA, PA 1	<input checked="" type="checkbox"/>
VD	CARMODY, PAUL	8433 EAST JAMISON CIR N.	ENGLEWOOD CO	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
P/D	L. Gregory Gloeckner	1460 Prestwick Drive	Carmel, IN 46032	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S/D	William P. Latimer	4635 S. 975 E.	Zionsville, IN 46077	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T/D	James S. Adams	10902 Sedgemoor Circle	Carmel, IN 46032	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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 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 receiver 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 changed, or in Block 13 if added, with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/97

Date

317-817-6863

Daytime Phone #

0007893

CR2E034 (9/96)