2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000005520

Entity Name: MSPS ENTREPRENEURIAL II, INC.

FILED Feb 14, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
% CMS AFFILIATED PARTNERSHIPS ONE BALA PLAZA, SUITE 412 BALA CYNWYD, PA 19004				C/O CMS AFFILIATED PARTNERSHIPS ONE BALA PLAZA, SUITE 412 BALA CYNWYD, PA 19004		
Current Mailing Address:				New Mailing Address:		
% LEGAL DEPARTMENT 1926 ARCH ST. PHILADELPHIA, PA 191031484			C/O LEGAL DEPARTMENT 1926 ARCH STREET PHILADELPHIA, PA 191031484			
FEI Number:	: 23-3003877	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
222 WEST WINTER F The above	PARK, FL 3278 named entitys	AVE., SUITE 101 39 US	rpose o	f changing it	ts registered	office or registered agent, or both,
	e of Florida.					
SIGNATU		ic Signature of Registered Agen	t			 Date
Election Car		satisfy its Intangible Tax filing requi g Trust Fund Contribution(). TORS:	rement a		, ,	S TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	PD () SILVERBERG, ONE BALA PLA BALA CYNWYD	ZA, SUITE 412		Title: Name: Address: City-St-Zip:	PD (SILBERBERG 151 CHERRY WYNNEWOO	LANE
Title: Name: Address: City-St-Zip:	VD () LANDMAN, WIL ONE BALA PLA BALA CYNWYE	ZA, SUITE 412		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	S () GREEN, JOHN ONE BALA PLA BALA CYNWYE			Title: Name: Address: City-St-Zip:	GREEN, JOH ONE BALA PL	X) Change ()Addition N S LAZA, SUITE 412 YD, PA 19004
Title: Name: Address: City-St-Zip:	CD () SALAMON, MAI ONE BALA PLA BALA CYNWYE	ZA, SUITE 412		Title: Name: Address: City-St-Zip:	CD (SOLOMON, M 429 DOVE LA BRYN MAWR	KE ROAD
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	MITCHELL, R ONE BALA PL) Change (X) Addition CICHARD A LAZA, SUITE 412 YD, PA 19004
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	WELCH, ING ONE BALA PL) Change (X) Addition RID R _AZA, SUITE 412 YD, PA 19004

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN S. GREEN V 02/14/2002