

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006312

Entity Name: WILMINGTON FINANCE, INC.

FILED  
Mar 01, 2005  
Secretary of State

## Current Principal Place of Business:

401 PLYMOUTH ROAD, STE. 400  
ATTN: CARL LUTZ  
PLYMOUTH MEETING, PA 19462

## Current Mailing Address:

401 PLYMOUTH ROAD, STE. 400  
ATTN: CARL LUTZ  
PLYMOUTH MEETING, PA 19462

## New Principal Place of Business:

401 PLYMOUTH ROAD, STE. 400  
ATTN: THOMAS L. WARD  
PLYMOUTH MEETING, PA 19462

## New Mailing Address:

401 PLYMOUTH ROAD, STE. 400  
ATTN: THOMAS L. WARD  
PLYMOUTH MEETING, PA 19462

FEI Number: 51-0356097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: EGAN, DANIEL JAMES  
Address: 401 PLYMOUTH ROAD, STE. 400  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: DS ( ) Delete  
Name: HAYES, TIMOTHY H  
Address: 601 NW 2ND ST  
City-St-Zip: EVANSVILLE, IN 47708

Title: SVP ( ) Delete  
Name: LUTZ, CARL P  
Address: 401 PLYMOUTH RD  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: DCEO ( ) Delete  
Name: SCHIANO, JERRY  
Address: 401 PLYMOUTH ROAD, STE. 400  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: D ( ) Delete  
Name: HENDRIX, BEN D  
Address: 601 NW 2ND ST  
City-St-Zip: EVANSVILLE, IN 47708

Title: D ( ) Delete  
Name: ROACH, GEORGE  
Address: 195 RIVER BEND DR  
City-St-Zip: CHARLOTTESVILLE, VA 22911

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SVP (X) Change ( ) Addition  
Name: WARD, THOMAS L  
Address: 401 PLYMOUTH RD  
City-St-Zip: PLYMOUTH MEETING, PA 19462

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: THOMAS L. WARD

SVP

03/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date