

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0547176

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000003768

1. Corporation Name

1717 CAPITAL MANAGEMENT COMPANY

Principal Place of Business

300 CONTINENTAL DRIVE
STE 3, SOUTH
NEWARK DE 19713
US

Mailing Address

P.O. BOX 15626
WILMINGTON DE 19850
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 25

26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29 30

9. Name and Address of Current Registered Agent

MCNICHOL, ROBERT E JR.
10002 PRINCESS PALM AVENUE
TAMPA FL 33619

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, typed or printed name of registered agent and the filer, if applicable.

(NOTE: Registered Agent Signature is not required for this filing.)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
S	SCARAMELLA, ADAM	1050 WESTLAKES DRIVE	BERWYN PA	X
D	MCCARTHY, J. KEVIN	1050 WESTLAKES DRIVE	BERWYN PA	[] DELETE
CO	KRULIKOWSKI, MICHAEL	300 CONTINENTAL DRIVE, STE. 3 SOUTH	NEWARK DE 19713	[] DELETE
P	REIHL, LANCE A	300 CONTINENTAL DRIVE	NEWARK DE 19713	[] DELETE
				[] DELETE
				[] DELETE
				[] DELETE

13.

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP
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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

9000002768789-1 Add
-02/09/99--01015--019
****150.00 ****150.00

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Krulikowski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/99

302-453-3810

CR2E034 (11/98)

FILED

99 JAN 25 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/18/1993

4. FEI Number

23-1705787

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 owes the current year Intangible
Personal Property Tax [] Yes [] No

10. Name and Address of New Registered Agent