PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.						
		FLORID/	DA DEPARTMENT OF STATE Sandra B. Mortham		7	APPRÖVED - AND FILED
DEINIGTATEMENT			Secretary of State VISION OF CORPORATIONS			
DOCUMENT # F9500001492						98 DEC 14 AM 8:45
Corporation Name					ļ	SECRETARY OF STATE TALLAHASSEE, FLORIDA
FISERV INVESTOR SERVICES, INC.						TALLAMASSEE, FLUHIUA
Principal Place of Business Mailing Addr			ess			
2005 MARKE ONE COMME PHILADELPHI	ERCE SQUARE	2005 MARKET ST ONE COMMERCE SQUARE PHILADELPHIA PA 19103-3212				
US If above addresses are incorrect in any way, line through incorrect information and enter correction below,				REIN	STATEMENT B	
New Principal Office Address, If Applicable 3.			3. New Mailing Office Address, if Applicable 53 99 SAN FRUCE			orated or Qualified
Suite, Apt. #,	, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			03/28/1995
City & State City & S						23-2728489 Not Applicable
Zip	Zip Country Zip		Country CERTIFICA			SOF STATUS DESIRED (\$8.75 Additional Fee required for a Certificate of Status
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)						
Title(s)	Name of Officers and/or Directors		Str	Street Address of Each Officer and/or Director ONOT Use Post Office Box Numbers) City / State / Zip		
	SPANE, WILLIAM T JR	234 LENAPE DR			BERWYN PA 19312	
D	DONATO, LAWRENCE E	930 SARAH DR			SPRINGFIELD PA 19064	
CE0	CUDES HERRY H.	SUDIEKSON TANK 2103 PLEASANT CREEK			MALVERN PA 19355: Kingwood Tr. 77345	
Р	CHARLES NADAFE MEHAFFEY, LORRI	2005 MARKET ST. SULL ROCKY BROOK DR.			PHIADEPHISPA Knowood, Tx 77345	
S	KAPLAN, ROBERT B		331 LAUREL OAKS DR			LANGHORNE PA 19407
1	STRINGFELLOW, CISA 1965 F			DAVE APTS1 NARBERTHING		NARBERTH PA Houston, Tx 77019
8. Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent	
CT COPPODATION SYSTEM					O Boy Number	e Not Accentable
1200 S. PINE ISLAND RD PLANTATION FL 33324			Suite, Apt. #, Etc.		P.O. Box Number is Not Acceptable) 1 36 4 0 - 1 1 2 2 3 8 - 0100 7 - 008	
City						State Zip Code FL
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.						
Signature of REGUIRED Date November 23, 1998 PREGISTERED AGENT MUST SIGN						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No N/A N/A						
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.						
SIGNATURE: SIGNATUR ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date						
LORDI E. MEHAFFEY, PRESIDENT 12/14/98 800-993-2037						