


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

FILED

Jan 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000004437 (8)

1. Corporation Name
QUESTPOINT G.P., INC.

Principal Place of Business
401 MARKET STREET
P.O. BOX 7618
PHILADELPHIA PA 19101-7618

Mailing Address
1339 CHESTNUT STREET
FC: 1-815-1. ATTN: RUTH BRADER
PHILADELPHIA PA 19107



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/13/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 23-2799031	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCEO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOUGHRY, III, JOSEPH M	1.2 NAME	
STREET ADDRESS	9413 WING FOOT COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	POTOMAC MD 20854	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRADER, RUTH J	2.2 NAME	
STREET ADDRESS	407 PENWYN ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WYNNWOOD PA 19096	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRITT, JOHN B	3.2 NAME	
STREET ADDRESS	1 CEDAR DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	TURNERSVILLE NJ 08012	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLTMAN, III, CHARLES L	4.2 NAME	
STREET ADDRESS	1035 CEDAR KNOLL	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEWTOWN SQUARE PA 19073	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FEINOUR, EUGENE P	5.2 NAME	
STREET ADDRESS	410 ROUNDHILL	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST DAVIDS PA 19087	5.4 CITY-ST-ZIP	
TITLE	VP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCQUAINE, GEORGE A	6.2 NAME	
STREET ADDRESS	10143 RED SPRUCE ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	FAIRFAX VA 22032	6.4 CITY-ST-ZIP	

14. I 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 on an attachment with an address.

Ruth J. Brader, Secretary

SIGNATURE:

[Signature]

RECEIVED

JAN 14 1998 215-973-3162

CR2E094 (10/97)