FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** PROFIT FLORIDA DEPARTMENT OF STATE Feb 05 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P15513 (5)DVI FINANCIAL SERVICES, INC. Principal Place of Business Mailing Address 500 HYDE PARK 500 HYDE PARK DOYLESTOWN PA 18901 DOYLESTOWN PA 18901 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/07/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 22-2725339 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 22 Fee Required City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. 29 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 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 tide if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change TITLE DELETE 1.1 TITLE ___ Addition D NAME O'HANLON, MICHAEL A 1.2 NAME **500 HYDE PARK** STREET ADDRESS 1.3 STREET ADDRESS **DOYLESTOWN PA 18901** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME BREAUX, MELVINC 2.2 NAME 500 HYDE PARK STREET ADORESS 2.3 STREET ADDRESS DOYLESTOWN PA CITY-ST-ZIP 2. 4 CITY - ST - ZIP ■ DELETE TITLE 3.1 TITLE ___ Addition COHN, GERALD L NAME 3.2 NAME **500 HYDE PARK** STREET ADDRESS 3.3 STREET ADDRESS

DOYLESTOWN PA 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.

3,4, CITY-ST-ZIP

4.3 STREET ADDRESS

Richard E. Miller

Doylestown, PA

5.3 STREET ADDRESS 500. Hyde Park

4.4 CiTY - ST-ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

DOYLESTOWN PA 18901

4041 MACARTHUR BLVD., #401

NEWPORT BEACH CA 92660

MCKENZIE, JENNIFER C.

GARFINKEL, STEVEN R.

500 HYDE PARK

500 HYDE PARK

DOYLESTOWN PA

TUREK, ANTHONY J

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

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1/26/98

18901

215-230-2939

Change

X Change

Change

Addition

XX Addition

Addition

(10/97