

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P17442 (5)

1. Corporation Name

Advanta Business Services Corp.

Principal Place of Business

Mailing Address

1020 Laurel Oak Rd.
P. O. Box 1228
Voorhees, NJ 08043

1020 Laurel Oak Rd.
P. O. Box 1228
Voorhees, NJ 08043

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/30/87

3a. Date of Last Report

04/11/95

4. FEI Number

23-2333786

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

The Prentice-Hall Corporation System
1201 Hayes Street
Suite 105
Tallahassee, FL 32301

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 or director (indicate)

(Indicate Registered Agent signature required when registering)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P/D	<input type="checkbox"/> DELETE
NAME	Lindenberg, Albert E.	
STREET ADDRESS	1020 Laurel Oak Rd.	
CITY-ST-ZIP	Voorhees, NJ 08043	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Alter, Dennis	
STREET ADDRESS	300 Welsh Rd.	
CITY-ST-ZIP	Horsham, PA 19044	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Greenawalt, Richard A.	
STREET ADDRESS	300 Welsh Rd.	
CITY-ST-ZIP	Horsham, PA 19044	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Shivers, Gary R.	
STREET ADDRESS	1020 Laurel Oak Rd.	
CITY-ST-ZIP	Voorhees, NJ 08043	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Kester, Gary	
STREET ADDRESS	1020 Laurel Oak Rd.	
CITY-ST-ZIP	Voorhees, NJ 08043	
TITLE	V/S	<input type="checkbox"/> DELETE
NAME	Witt, Michael J.	
STREET ADDRESS	1020 Laurel Oak Rd.	
CITY-ST-ZIP	Voorhees, NJ 08043	

1.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Dyer, Daniel P.	
1.3 STREET ADDRESS	1020 Laurel Oak Rd.	
1.4 CITY-ST-ZIP	Voorhees, NJ 08043	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Wesselink, David D.	
2.3 STREET ADDRESS	300 Welsh Rd.	
2.4 CITY-ST-ZIP	Horsham, PA 19044	
3.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Fore, George	
3.3 STREET ADDRESS	1020 Laurel Oak Rd.	
3.4 CITY-ST-ZIP	Voorhees, NJ 08043	
4.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	McGurk, Kathleen	
4.3 STREET ADDRESS	1020 Laurel Oak Rd.	
4.4 CITY-ST-ZIP	Voorhees, NJ 08043	
5.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Raffensperger, James	
5.3 STREET ADDRESS	1020 Laurel Oak Rd.	
5.4 CITY-ST-ZIP	Voorhees, NJ 08043	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M.J. Witt

4/18/96

(609) 782-7300

Daytime Phone X3274

CR2E034 (12/95)