

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

**FILED**

**Apr 27 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P17442(5)**  
 1. Corporation Name  
**Advanta Business Services Corp.**

Principal Place of Business <b>1020 Laurel Oak Road P. O. Box 1228 Voorhees, NJ 08043</b>	Mailing Address <b>1020 Laurel Oak Road P. O. Box 1228 Voorhees, NJ 08043</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		4. FEI Number <b>23-2333786</b>		Applied For <input type="checkbox"/> Not Applicable	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
22. City & State		27. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
23. Zip		28. Zip		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
24. Country		25. Country		29. Country		30. Country	

3. Date Incorporated or Qualified  
**12/30/87**

**9. Name and Address of Current Registered Agent**  
**The Prentice-Hall Corporation System  
 1201 Hayes Street, Suite 105  
 Tallahassee, FL 32301**

**10. Name and Address of New Registered Agent**

81. Name	<b>Charles H. Podowski</b>
82. Street Address (P.O. Box Number is Not Acceptable)	<b>1020 Laurel Oak Road</b>
83. City & State	<b>Voorhees, NJ 08043</b>
84. Zip Code	<b>08043</b>
85. State	<b>NJ</b>

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: \_\_\_\_\_ (NOT: Registered Agent signature required when remaining) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P/D</b>	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Lindenberg, Albert E.</b>	1.2 NAME	<b>Charles H. Podowski</b>
STREET ADDRESS	<b>1020 Laurel Oak Road</b>	1.3 STREET ADDRESS	<b>1020 Laurel Oak Road</b>
CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>	1.4 CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>
TITLE	<b>D</b>	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Hart, Alex W.</b>	2.2 NAME	<b>Stevens, Philip C.</b>
STREET ADDRESS	<b>1020 Laurel Oak Road</b>	2.3 STREET ADDRESS	<b>1020 Laurel Oak Road</b>
CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>	2.4 CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>
TITLE	<b>V</b>	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Shivers, Gary R.</b>	3.2 NAME	<b>Millman, Edward E.</b>
STREET ADDRESS	<b>1020 Laurel Oak Road</b>	3.3 STREET ADDRESS	<b>1020 Laurel Oak Road</b>
CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>	3.4 CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>
TITLE	<b>V</b>	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Kester, Gary</b>	4.2 NAME	<b>Noles, Michael</b>
STREET ADDRESS	<b>1020 Laurel Oak Road</b>	4.3 STREET ADDRESS	<b>1020 Laurel Oak Road</b>
CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>	4.4 CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>
TITLE	<b>V</b>	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Rehling, Michael J.</b>	5.2 NAME	<b>Ninetto, Anthony, Jr.</b>
STREET ADDRESS	<b>1020 Laurel Oak Road</b>	5.3 STREET ADDRESS	<b>1020 Laurel Oak Road</b>
CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>	5.4 CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>
TITLE	<b>V/S</b>	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Witt, Michael J.</b>	6.2 NAME	<b>Silver, Cole B.</b>
STREET ADDRESS	<b>1020 Laurel Oak Road</b>	6.3 STREET ADDRESS	<b>1020 Laurel Oak Road</b>
CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>	6.4 CITY-ST-ZIP	<b>Voorhees, NJ 08043</b>

86. City	<b>FL</b>	85. Zip Code	<b>08043</b>
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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.

SIGNATURE: *Cole B Silver* **Cole B. Silver** 800-255-0022 ext. 3509

CR2E034 (10/97)