

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17442

FILED  
Feb 02, 2005  
Secretary of State

Entity Name: ADVANTA BUSINESS SERVICES CORP.

## Current Principal Place of Business:

1020 LAUREL OAK ROAD  
VOORHEES, NJ 08043

## New Principal Place of Business:

40 E. CLEMENTON ROAD  
GIBBSBORO, NJ 08026

## Current Mailing Address:

WELSH & MCKEAN ROADS  
P.O. BOX 844  
SPRING HOUSE, PA 19477

## New Mailing Address:

FEI Number: 23-2333786      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES STREET  
SUITE 105  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DC ( ) Delete  
Name: ALTER, DENNIS  
Address: P.O. BOX 844  
City-St-Zip: SPRING HOUSE, PA 19477

Title: DCFO ( ) Delete  
Name: BROWNE, PHILIP M  
Address: P.O. BOX 844  
City-St-Zip: SPRING HOUSE, PA 19477

Title: DP ( ) Delete  
Name: ROSOFF, WILLIAM A  
Address: P.O. BOX 844  
City-St-Zip: SPRING HOUSE, PA 19477

Title: SV ( ) Delete  
Name: DIWILLIAMS, LENNY  
Address: P.O. BOX 844  
City-St-Zip: SPRING HOUSE, PA 19477

Title: S ( ) Delete  
Name: MAI, ELIZABETH H  
Address: P.O. BOX 844  
City-St-Zip: SPRING HOUSE, PA 19477

Title: SV ( ) Delete  
Name: BLACKMON, LARRY  
Address: 40 E. CLEMENTON ROAD  
City-St-Zip: GIBBSBORO, NJ 08026

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN GIUSTI

AS

02/02/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date