


**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 02, 2003 8:00 am**  
**Secretary of State**

04-02-2003 90033 048 \*\*\*150.00

**DOCUMENT # P21239**

1. Entity Name  
**ADVANTA INSURANCE COMPANY**



Principal Place of Business  
**WELSH & MCKEAN ROADS  
SPRING HOUSE, PA 19477 US**

Mailing Address  
**P O BOX 429  
SPRING HOUSE, PA 19477 US**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **93-0924247** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICES CO.  
1201 HAYS ST  
TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number Is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent's signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$650.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVD BROWNE, PHILIP M WELSH &amp; MCKEAN ROADS SPRING HOUSE, PA 19044</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BECK, JEFFREY D WELSH &amp; MCKEAN ROADS SPRING HOUSE, FL 19477</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SRVT KROUCHICK, ROBERT G WELSH &amp; MCKEAN RDS SPRING HOUSE, PA 19477</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DC ALTER, DENNIS WELSH &amp; MCKEAN RDS SPRING HOUSE, PA 19477</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DSVG SOUDERS, RONALD L WELSH &amp; MCKEAN ROADS SPRING HOUSE, PA 19477</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP WLAZ, MARK W WELSH &amp; MCKEAN ROADS SPRING HOUSE, PA 19477</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Carmy Jauder* **3/28/03**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRZE034 (10/02)

Attachment  
**ADVANTA INSURANCE AGENCY, INC.**

90066997  
 #P21239

and  
**FIRST ADVANTA INSURANCE AGENCY, INC.**  
**OFFICERS AND DIRECTORS**

Name	Title	Business Address
Dennis Alter	Chairman of the Board and Director	Welsh & McKean Roads Spring House, PA 19477
Ronald L. Souders	President, General Counsel, and Director	Welsh & McKean Roads Spring House, PA 19477
Mark W. Wlaz	Senior Vice President, Secretary and Director	Welsh & McKean Roads Spring House, PA 19477
Robert G. Krouchick	Senior Vice President, CFO and Treasurer	Welsh & McKean Roads Spring House, PA 19477
Philip M. Browne	Senior Vice President	Welsh & McKean Roads Spring House, PA 19477
Leonora G. Jacinto	Assistant Treasurer	Welsh & McKean Roads Spring House, PA 19477
Francis Joseph Noonan	Assistant Secretary	Welsh & McKean Roads Spring House, PA 19477
Laurie L. Long	Assistant Secretary	Welsh & McKean Roads Spring House, PA 19477
<b>Stockholder (10% or More)</b>		
Company is 100% owned by:		
Advanta Insurance Company		
Welsh & McKean Roads		
Spring House, PA 19477		