

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

FILED

**Apr 28 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # F94000004368 (6)
1. Corporation Name
ADVANTA NAME CORP.



Principal Place of Business: **WELSH & MCKEAN RDS
300 WELSH RD
SPRING HOUSE PA 19477-0844
US**

Mailing Address: **WELSH & MCKEAN RDS
300 WELSH RD
SPRING HOUSE PA 19477-0844
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)

2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

3. Date Incorporated or Qualified: **08/23/1994**

4. FEI Number: **23-2741080** Applied For: Not Applicable:

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST., STE. 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	Director & President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALTER, DENNIS	1.2 NAME	Christopher Derganc
STREET ADDRESS	WELSH & MCKEAN RDS	1.3 STREET ADDRESS	Welsh & McKean Roads
CITY-ST-ZIP	SPRING HOUSE PA	1.4 CITY-ST-ZIP	Spring House, PA 19477
TITLE	VS <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHNEYER, GENE S	2.2 NAME	Liane Cohen
STREET ADDRESS	WELSH & MCKEAN RDS	2.3 STREET ADDRESS	Welsh & McKean Roads
CITY-ST-ZIP	SPRING HOUSE PA	2.4 CITY-ST-ZIP	Spring House, PA 19477
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CALAMARI, JOHN	3.2 NAME	William A. Rosoff
STREET ADDRESS	200 TOURNAMENT DR	3.3 STREET ADDRESS	Welsh & McKean Roads
CITY-ST-ZIP	HORSHAM PA	3.4 CITY-ST-ZIP	Spring House, PA 19477
TITLE	AS <input checked="" type="checkbox"/> DELETE	4.1 TITLE	Assistant Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEAGLER, CAROL J	4.2 NAME	Susan Giusti
STREET ADDRESS	WELSH & MCKEAN RDS	4.3 STREET ADDRESS	Welsh & McKean Roads
CITY-ST-ZIP	SPRING HOUSE PA	4.4 CITY-ST-ZIP	Spring House, PA 19477
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 in an attachment with an address.

SIGNATURE _____ DATE **4-14-98**

CR2E034 (10/97)

**FLORIDA DEPARTMENT OF STATE
ANNUAL REPORT 1998 FOR ADVANTA NAME CORP.**

ITEM 12:

OFFICERS

<u>OFFICERS</u>	<u>TITLE</u>	<u>ADDRESS</u>
Christopher Derganc	President	Welsh & McKean Roads, Spring House, PA 19477
Liane Cohen	Secretary	Welsh & McKean Roads, Spring House, PA 19477
John Calamari	Treasurer	Welsh & McKean Roads Spring House, PA 19477
Susan Giusti	Assistant Secretary	Welsh & McKean Roads Spring House, PA 19477

DIRECTORS

Dennis Alter		Welsh & McKean Roads Spring House, PA 19477
William A. Rosoff		Welsh & McKean Roads Spring House PA 19477
Christopher Derganc		Welsh & McKean Roads Spring House, PA 19477