

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000083606

1. Entity Name

DELTA DURABLES, INC.

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90079 019 ***150.00

Principal Place of Business 2800 NAVY BLVD SUITE 4 PENSACOLA FL 32505	Mailing Address 125 W ROMANA ST SUITE 400 PENSACOLA FL 32501-5848
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3405478	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BELL, SCOTT J
125 W ROMANA ST, SUITE 400
PENSACOLA FL 32501

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	BELL, SCOTT J	
STREET ADDRESS	125 W. ROMANA ST. STE 400	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	V	<input type="checkbox"/> Delete
NAME	FERGUSON, KEN	
STREET ADDRESS	125 W. ROMANA ST. STE 400	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	S	<input type="checkbox"/> Delete
NAME	FOSTER, DANA R	
STREET ADDRESS	125 W. ROMANA ST. STE 400	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	T	<input type="checkbox"/> Delete
NAME	TOLAN, JOHN J J	
STREET ADDRESS	125 W. ROMANA ST. STE 400	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	D	<input type="checkbox"/> Delete
NAME	TREHERN, EDWARD	
STREET ADDRESS	125 W. ROMANA ST. STE 400	
CITY-ST-ZIP	PENSACOLA FL 32501	
TITLE	D	<input type="checkbox"/> Delete
NAME	ST. PE, GERALD	
STREET ADDRESS	125 W. ROMANA ST. STE 400	
CITY-ST-ZIP	PENSACOLA FL 32501	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE OF SCOTT J BELL
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/00 850-432-0650
 Date Daytime Phone #