2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000068517

Entity Name: DELTA SITE DEVELOPMENT CORP.

Current Principal Place of Business:

18500 NORTH ALLIED WAY PHOENIX. AZ 85054

Current Mailing Address:

18500 NORTH ALLIED WAY PHOENIX. AZ 85054 US

FEI Number: 65-0936999

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	DIRECTOR, VP	Title	DIRECTOR, PRESIDENT
Name	DELGHIACCIO, BRIAN M.	Name	EDDLEBLUTE, STEVEN HEATH
Address	18500 NORTH ALLIED WAY	Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054	City-State-Zip:	PHOENIX AZ 85054
Title	DIRECTOR	Title	VP
Name	GOEBEL, BRIAN A.	Name	BALES, BRIAN A.
Address	18500 NORTH ALLIED WAY	Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054	City-State-Zip:	PHOENIX AZ 85054
Title	VP, ASSISTANT SECRETARY	Title Name	VP, ASSISTANT SECRETARY EGGLESTON, W. T. JR.
Name Address City-State-Zip:	BENTER, TIM M. 18500 NORTH ALLIED WAY PHOENI AZ 85054	Address City-State-Zip:	18500 NORTH ALLIED WAY PHOENIX AZ 85054
Address	18500 NORTH ALLIED WAY	Address	18500 NORTH ALLIED WAY
Address City-State-Zip:	18500 NORTH ALLIED WAY PHOENI AZ 85054	Address City-State-Zip: Title Name	18500 NORTH ALLIED WAY PHOENIX AZ 85054 VP, ASSISTANT SECRETARY RISSMAN, MICHAEL P.
Address City-State-Zip: Title	18500 NORTH ALLIED WAY PHOENI AZ 85054 VP	Address City-State-Zip: Title Name Address	18500 NORTH ALLIED WAY PHOENIX AZ 85054 VP, ASSISTANT SECRETARY RISSMAN, MICHAEL P. 18500 NORTH ALLIED WAY
Address City-State-Zip: Title Name	18500 NORTH ALLIED WAY PHOENI AZ 85054 VP OLSON, JAMES H.	Address City-State-Zip: Title Name	18500 NORTH ALLIED WAY PHOENIX AZ 85054 VP, ASSISTANT SECRETARY RISSMAN, MICHAEL P. 18500 NORTH ALLIED WAY

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I hereby 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 all other like empowered.

SIGNATURE: EILEEN B. SCHULER

SECRETARY

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 16, 2014 Secretary of State CC8889135413

Officer/Director Detail Continued :

Title Name Address	VP, ASSISTANT SECRETARY SWEET, ANDREW J. 18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054
Title	SECRETARY
Name	SCHULER, EILEEN B.
Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054
Title	ASSISTANT TREASURER
Name	LACY, MARSHA A.
Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054

Title	VP, TAX
Name	FOCAZIO, LAWRENCE
Address	18500 NORTH ALLIED WAY
City-State-Zip:	PHOENIX AZ 85054
Title	TREASURER, VP, FINANCE
Title Name	TREASURER, VP, FINANCE LANG, EDWARD A. III
	, ,
Name	LANG, EDWARD A. III