

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 343119

1. Entity Name  
DELTA LEASING CORPORATION



Principal Place of Business  
6021 ADAMO DR.  
TAMPA, FL 33619

Mailing Address  
6021 ADAMO DR.  
TAMPA, FL 33619

**FILED**  
**Jan 09, 2007 08:00 AM**  
**Secretary of State**



01032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-1280631  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HALL, ROBERT H  
6021 ADAMO DR.  
TAMPA, FL 33619

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when retreating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE V  
NAME HALL, ROBERT H JR.  
STREET ADDRESS 209 TREASURE DRIVE  
CITY-ST-ZIP TAMPA, FL 33609

TITLE STD  
NAME HALL, JUDITH M  
STREET ADDRESS 22 SANDPIPER RD.  
CITY-ST-ZIP TAMPA, FL 33609

TITLE PD  
NAME HALL, ROBERT H  
STREET ADDRESS 22 SANDPIPER RD.  
CITY-ST-ZIP TAMPA, FL 33609

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

01/10/07-80030-008 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

*Robert H. Hall Jr.*

*Robert H. Hall Jr.*

01-03-07

813.621.4605

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #