

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 836008

FILED  
Mar 26, 2009  
Secretary of State

**Entity Name:** DELON HAMPTON & ASSOCIATES, CHARTERED, INCORPORATED

**Current Principal Place of Business:**

900 SEVENTH ST. NW  
SUITE 800  
WASHINGTON, DC 20001 US

**New Principal Place of Business:**

**Current Mailing Address:**

900 SEVENTH ST. NW  
SUITE 800  
WASHINGTON, DC 20001 US

**New Mailing Address:**

900 SEVENTH STREET, N.W.  
SUITE 800  
WASHINGTON, DC 20001 US

**FEI Number:** 52-0968507

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FRANK, HERBERT  
632 SHERIDAN BLVD.  
ORLANDO, FL 32804 US

**Name and Address of New Registered Agent:**

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

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: COBS ( ) Delete  
Name: HAMPTON, DELON,  
Address: 900 SEVENTH ST. NW, SUITE 800  
City-St-Zip: WASHINGTON, DC 20001

Title: PAT ( ) Delete  
Name: HUMBER, JR., JEFFREY, L  
Address: 900 SEVENTH ST. NW, SUITE 800  
City-St-Zip: WASHINGTON, DC 20001

Title: AS ( ) Delete  
Name: ROGERS, ELIJAH B,  
Address: 900 SEVENTH ST. NW, SUITE 800  
City-St-Zip: WASHINGTON, DC 20001

Title: VPT (X) Delete  
Name: KELLOGG, GARY C  
Address: 900 SEVENTH ST. NW., SUITE 800  
City-St-Zip: WASHINGTON, DC 20001

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPT (X) Change ( ) Addition  
Name: KELLOGG, C. GARY,  
Address: 900 SEVENTH ST. NW, SUITE 800  
City-St-Zip: WASHINGTON, DC 20001

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DELON HAMPTON

COBS

03/26/2009

Electronic Signature of Signing Officer or Director

Date