

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

07 AUG 10 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 844126

1. Entity Name

DELANEY DEVELOPMENT, INC.



Principal Place of Business

225 SPRINGHILL MEMORIAL RACE
MOBILE, AL 36608

Mailing Address

P.O. BOX 16126
MOBILE, AL 36616

DO NOT WRITE IN THIS SPACE



04262007 No Chg-P CR2E034 (11/05)

4. FEI Number

63-0412882

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SWANSON, CAROLINE M
940 SANTA ROSA BLVD.
FT. WALTON BEACH, FL 33548

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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 relinquishing)

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

900108204639
7/07--01004--019 **150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DELANEY, JAMES R 3731 CALDERWOOD MOBILE, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DELANEY, WILLIAM R 11 KINGSWAY MOBILE, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FROST, DARLENE D 431, MARQUETTE DR MOBILE, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELANEY, BILLIE M 3731 CALDERWOOD MOBILE, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELANEY, MARY H 11 KINGSWAY MOBILE, AL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 like empowered.

SIGNATURE:

Delaney, T. Rom V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/07
Date

251-440-0910
Daytime Phone #