

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002299

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: DELIVERY SPECIALISTS, INC.

## Current Principal Place of Business:

2000 RIVEREDGE PARKWAY  
SUITE 880  
ATLANTA, GA 30328

## New Principal Place of Business:

## Current Mailing Address:

2000 RIVEREDGE PARKWAY  
SUITE 880  
ATLANTA, GA 30328

## New Mailing Address:

FEI Number: 58-2444556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KERLEY, GENE  
10255-B GENERAL DRIVE  
ORLANDO, FL 32824 US

## Name and Address of New Registered Agent:

KERLEY, GENE  
10255-5B GENERAL DRIVE  
ORLANDO, FL 32824 US

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:

04/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: STEWART, LEVER F  
Address: 2000 RIVEREDGE PKWY, STE 880  
City-St-Zip: ATLANTA, GA 30328

Title: V ( ) Delete  
Name: STEWART, JAN  
Address: 2000 RIVEREDGE PKWY, STE 880  
City-St-Zip: ATLANTA, GA 30328

Title: V ( ) Delete  
Name: KERLEY, GENE  
Address: 10255-B GENERAL DRIVE  
City-St-Zip: ORLANDO, FL 32824

Title: CFO ( ) Delete  
Name: WILLIAMS, DONNA H  
Address: 2000 RIVEREDGE PKWY, STE 880  
City-St-Zip: ATLANTA, GA 30328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change ( ) Addition  
Name: KERLEY, GENE  
Address: 10255-5B GENERAL DRIVE  
City-St-Zip: ORLANDO, FL 32824

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DONNA H. WILLIAMS

CFO

04/12/2007

Electronic Signature of Signing Officer or Director

Date