2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000891

Entity Name: DELCAN CORPORATION

FILED Jan 11, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

650 E ALGONQUIN ROAD SUITE 104 SCHAUMBURG, IL 60173

Current Mailing Address: New Mailing Address:

650 E ALGONQUIN ROAD SUITE 104 SCHAUMBURG, IL 60173

FEI Number: 36-3523452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name: KERR, JAMES A

Address: 650 E ALGONQUIN RD, STE 104 City-St-Zip: SCHAUMBURG, IL 60173

Title: F

Name: STEARMAN, BRIAN

Address: 650 E ALGONQUIN RD, STE 104 City-St-Zip: SCHAUMBURG, IL 60173

Title: F

Name: YOSHIDA, LESTER

Address: 650 E ALGONQUIN RD, STE 104 City-St-Zip: SCHAUMBURG, IL 60173

Title: COO

Name: PRINCE, JENEANE

Address: 650 E ALGONQUIN RD, STE 104 City-St-Zip: SCHAUMBURG, IL 60173

Title: VP

Name: POWERS, JACK

Address: 650 E ALGONQUIN RD, STE 104 City-St-Zip: SCHAUMBURG, IL 60173

Title: SEC

Name: ZUMBEK, CHRISTINE

Address: 650 E ALGONQUIN RD, STE 104 City-St-Zip: SCHAUMBURG, IL 60173

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: J.N. POWERS VP 01/11/2010