


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # F03000003942

1. Entity Name
DELTEL, INC.



Principal Place of Business
**27071 ALISO CREEK RD SUITE 150
ALISO VIEJO, CA 92656**

Mailing Address
**135 N CHURCH ST
STE 4
KALAMAZOO, MI 49007**



01052007 No Chg-P CR2E034 (11/05)

4. FEI Number
46-0500395

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BLANTON, EDWIN F
810 THOMASVILLE ROAD
TALLAHASSEE, FL 32303**

**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 _____ DATE _____
Signature, typed or printed name of registered agent (and title if applicable) (NOT: Registered Agent signature required when reinstating)

**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**

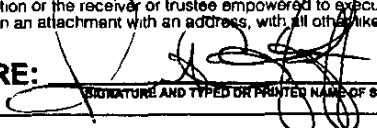
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCSD WALDFOGEL, KIRK 27071 ALISO CREEK RD STE 150 ALISO VIEJO, CA 92656
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WELSH, IAN 27071 ALISO CREEK RD STE 150 ALISO VIEJO, CA 92656
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO HUFF, ROBERT G 27071 ALISO CREEK RD STE 150 ALISO VIEJO, CA 92656
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**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 like empowered

SIGNATURE:  **Robert G. Huff** **1-5-07** **444-0150x512**
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #