

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000004801 (5)

1. Corporation Name

THE DELTA GROUP, INC.



Principal Place of Business

220 NORTH MAIN STREET, SUITE 300
GREENVILLE SC 29601

Mailing Address

220 NORTH MAIN STREET, SUITE 300
GREENVILLE SC 29601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/05/1995

4. FEI Number

57-1028793

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CHAMBERLAIN, PETE
2714 REW CIR
STE. 200
OCFEE FL 34761

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PC	<input checked="" type="checkbox"/> DELETE
NAME	FORTHMAN, L. C	
STREET ADDRESS	220 NORTH MAIN STREET, SUITE 300	
CITY-ST-ZIP	GREENVILLE SC 29601	
TITLE	DVT	<input type="checkbox"/> DELETE
NAME	FORTHMAN, M. T	
STREET ADDRESS	220 NORTH MAIN STREET, SUITE 300	
CITY-ST-ZIP	GREENVILLE SC 29601	
TITLE	DVS	<input type="checkbox"/> DELETE
NAME	MARTIN, DAVID R	
STREET ADDRESS	220 NORTH MAIN STREET, SUITE 300	
CITY-ST-ZIP	GREENVILLE SC 29601	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HOUSER, CHARLIE	
STREET ADDRESS	220 NORTH MAIN STREET, SUITE 300	
CITY-ST-ZIP	GREENVILLE SC	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CUBBAGE, HEIGHTON	
STREET ADDRESS	220 NORTH MAIN STREET SUITE 300	
CITY-ST-ZIP	GREENVILLE SC	
TITLE	D	<input type="checkbox"/> DELETE
NAME	POOLE, DAVID	
STREET ADDRESS	220 NORTH MAIN STREET SUITE 300	
CITY-ST-ZIP	GREENVILLE SC	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)