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2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F97000000929

1. Entity Name
DELANEY'S OF ALABAMA, INC.

40129833

Principal Place of Business	Mailing Address
PO BOX 16126 MOBILE, AL 36616 940 SANTA ROSA BLVD FORT WALTON BEACH, FL 33548	PO BOX 16126 MOBILE, AL 36616

04262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
63-0196232
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SWANSON, CAROLEEN M
940 SANTA ROSA BLVD
FORT WALTON BEACH, FL 33548

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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 reinstating) 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

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	DELANEY, J.R.
STREET ADDRESS	3716 SPRINGHILL MEMORIAL DRIVE NORTH
CITY-ST-ZIP	MOBILE, AL 36608
TITLE	DS
NAME	DELANEY, W.R.
STREET ADDRESS	11 KINGSWAY
CITY-ST-ZIP	MOBILE, AL 36608
TITLE	DV
NAME	FROST, DARLENE D
STREET ADDRESS	3716 SPRINGHILL MEMORIAL DRIVE NORTH
CITY-ST-ZIP	MOBILE, AL 36608
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Andy T Brown V. P. 4/26/07 251-460-0910
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #