

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G15671

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: DELLEM ASSOCIATES, INC.

## Current Principal Place of Business:

14023 N DALE MABRY HWY  
TAMPA, FL 336182401 US

## New Principal Place of Business:

## Current Mailing Address:

14023 N. DALE MABRY HWY  
TAMPA, FL 336182401 US

## New Mailing Address:

14023 N DALE MABRY HWY  
TAMPA, FL 336182401 US

FEI Number: 59-2242356

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEAVER, LARRY S  
16115 EAST COURSE DR  
TAMPA, FL 336241123 US

## Name and Address of New Registered Agent:

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: PCTD ( ) Delete  
Name: WEAVER, LARRY S  
Address: 16115 EAST COURSE DRIVE  
City-St-Zip: TAMPA, FL 336241123

Title: VSD ( ) Delete  
Name: WEAVER, LARRY S JR  
Address: 1050 NASHVILLE DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D ( ) Delete  
Name: WEAVER, SHARON C  
Address: 16115 E COURSE DR.  
City-St-Zip: TAMPA, FL 336241123

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSD (X) Change ( ) Addition  
Name: WEAVER, LARRY S JR  
Address: 1050 NASHVILLE DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33544

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

I hereby certify that the information supplied with this filing does not qualify 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: LARRY S. WEAVER

PRES

03/19/2009

Electronic Signature of Signing Officer or Director

Date