

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 8:00 am
Secretary of State

01-19-2007 90036 038 ***150.00

DOCUMENT # H71998

1. Entity Name
ADELPHI PROPERTIES, INC.



Principal Place of Business

**123 AVENUE "C" SW
P.O. DRAWER 1151
WINTER HAVEN, FL 33882-1151 US**

Mailing Address

**123 AVENUE "C" SW
P.O. DRAWER 1151
WINTER HAVEN, FL 33882-8151**

60003787



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

59-2610812

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TRAKAS, ANDREW P.
123 AVENUE "C" SW
WINTER HAVEN, FL 33880**

Name

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

City

FL

Zip Code

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 PSD ☐ Delete
NAME TRAKAS, A. PETER
STREET ADDRESS 123 AVE. "C" SW
CITY-ST-ZIP WINTER HAVEN, FL

TITLE VP ☐ Delete
NAME TRAKAS, PETER A II
STREET ADDRESS 123 AVE. C, S.W.
CITY-ST-ZIP WINTER HAVEN, FL 33880

TITLE VP ☐ Delete
NAME TRAKAS, ALYSA A
STREET ADDRESS 123 AVE. C, S.W.
CITY-ST-ZIP WINTER HAVEN, FL 33880

TITLE AS ☐ Delete
NAME TRAKAS, ADRIENNE T
STREET ADDRESS 123 AVE. C S.W.
CITY-ST-ZIP WINTER HAVEN, FL 33880

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Trakas, A. Peter
STREET ADDRESS 123 Ave. "C" SW
CITY-ST-ZIP Winter Haven, FL 33880

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Change ☐ Addition
NAME Trakas, Alysa A
STREET ADDRESS 123 Ave. "C" SW
CITY-ST-ZIP Winter Haven, FL 33880

TITLE S ☒ Change ☐ Addition
NAME Trakas, Adrienne T.
STREET ADDRESS 123 Ave. "C" SW
CITY-ST-ZIP Winter Haven, FL 33880

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #