


**- 2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L01727 1. Entity Name DELTA SERVICE AUTO STATION, INC.		
Principal Place of Business C/O JOHN ANTHIS 4 S. PINELLAS AVENUE TARPON SPRINGS, FL 34689 US	Mailing Address C/O JOHN ANTHIS 4 S. PINELLAS AVENUE TARPON SPRING, FL 34689 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ANTHIS, JOHN 4 S. PINELLAS AVENUE TARPON SPRINGS, FL 34689		DO NOT WRITE IN THIS SPACE
2. 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. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000654154 03/13/07-80051-001 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANTHIS, JOHN 1103 OAKWOOD ST TARPON SPRINGS, FL 34689	
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TITLE 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: <u>John Anthis</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		2-28-07 <small>Date Daytime Phone #</small>



02272007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2961850	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE
IN THIS SPACE