

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L52001

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: DELTA POWER, INC.

## Current Principal Place of Business:

211 N.W. FRANKLIN ST.  
LAKE CITY, FL 32055

## New Principal Place of Business:

## Current Mailing Address:

211 N.W. FRANKLIN ST.  
LAKE CITY, FL 32055

## New Mailing Address:

FEI Number: 59-2994593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITHEY, JAMES RHETT  
211 N.W. FRANKLIN ST.  
LAKE CITY, FL 32055 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: P ( ) Delete  
Name: SMITHEY, JAMES RHETT,  
Address: 3454 S COUNTY ROAD 242  
City-St-Zip: LAKE CITY, FL 32024

Title: V ( ) Delete  
Name: SMITHEY, BRYAN,  
Address: 1490 NW BROWN ROAD  
City-St-Zip: LAKE CITY, FL 32055

Title: ST ( ) Delete  
Name: SMITHEY, ANN  
Address: 321 SW CROSS POINTE CT  
City-St-Zip: LAKE CITY, FL 32024

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITHEY, JAMES RHETT,  
Address: 3454 SW COUNTY ROAD 242  
City-St-Zip: LAKE CITY, FL 32024

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANN SMITHEY

ST

01/06/2005

Electronic Signature of Signing Officer or Director

Date