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APPROVED
95 MAY -1 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT

1995 5-195 B 65710

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N46450 (5)

1. Corporation Name

NATIONAL DELPHI AUTOMATION TECHNOLOGY ADVISORY GROUP, INC.

Principal Place of Business	Mailing Address
1633 EAST VINE STREET 206 KISSIMMEE FL 34744 US	1633 EAST VINE STREET 206 KISSIMMEE FL 34744 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/12/1991
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-3096428 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21) | 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)
City & State (23) | City & State (28)
Zip (24) Country (25) | Zip (29) Country (30)

9. Name and Address of Current Registered Agent

GINKEL, KATHERINE C.
1633 EAST VINE STREET
SUITE 206
KISSIMMEE FL 34744

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	President + Director	☑ Change ☐ Addition
NAME	EMERSON, BRIAN	12 NAME	CHARLES MOYNIHAN	
STREET ADDRESS	1538 RT 23	13 STREET ADDRESS	350 Z JAMES ST	
CITY-ST-ZIP	WAYNE NJ 07470	14 CITY-ST-ZIP	SYRACUSE, NY 13206	
TITLE	D	21 TITLE	Secretary + Director	☐ Change ☑ Addition
NAME	CRAWFORD, TERRY	22 NAME	ERIC ENT'S	
STREET ADDRESS	1201 US HWY 1 #445	23 STREET ADDRESS	3005 DOUGLAS Rd	
CITY-ST-ZIP	N PALM BEACH FL 33408	24 CITY-ST-ZIP	Toledo, OHIO 43606	
TITLE	D	31 TITLE	Director + Vice-President	☑ Change ☑ Addition
NAME	NELSON, KENDALL	32 NAME		
STREET ADDRESS	446 S HWY 400 E	33 STREET ADDRESS		
CITY-ST-ZIP	SALT LAKE CITY UT 84158 (Same)	34 CITY-ST-ZIP		
TITLE	AT	41 TITLE	Treasurer + Director	☐ Change ☑ Addition
NAME	GINKEL, KATHERINE C	42 NAME	SUZAN FANNIN	
STREET ADDRESS	5306 FOREST BREEZE COURT	43 STREET ADDRESS	P.O. BOX 6745 NA	
CITY-ST-ZIP	ST. CLOUD FL 34744 (Same)	44 CITY-ST-ZIP	LUBBOCK, TX 79493	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Katherine C. Ginkel KATHERINE C. GINKEL 4/19/95 407-932-0084
SIGNATURE AND TYPED OR PRINTED NAME OF IDENTIFYING OFFICER OR DIRECTOR — Date — Daytime Phone #

0020694