

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N96000006494 (6)
1. Corporation Name
DELPHI CENTER, INC.



Principal Place of Business Mailing Address
702 WEST ADELEE ST TAMPA FL 33603 702 WEST ADELEE ST TAMPA FL 33603

3. Date Incorporated or Qualified
12/20/1996
4. FEI Number
59-3419545
Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 2514 W. Kennedy Blvd. Suite, Apt. #, etc. 27
22 City & State 27 City & State
23 Tampa, FL 28
24 Zip 33609 25 Country USA 29 Zip 30 Country

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. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
OSTERHOUT, TERRI
702 WEST ADELEE ST
TAMPA FL 33603

10. Name and Address of New Registered Agent
81 Name Karin Kearns, LM.
82 Street Address (P.O. Box Number is Not Acceptable) 702 W. Adelee St
83
84 City Tampa FL 85 Zip Code 33603

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.
SIGNATURE Karin Kearns, LM. Exec. Director DATE 1/7/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BRADY, KELLY	
STREET ADDRESS	1512 PIERMAJ LN	
CITY-ST-ZIP	LUTZ FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	NUTTA, JOYCE	
STREET ADDRESS	9525 60TH ST NO	
CITY-ST-ZIP	PINELLAS PRK FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	PELLEGRINO, MARY ANN	
STREET ADDRESS	840 LUTZ LAKE FERN RD	
CITY-ST-ZIP	LUTZ FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	PULLEN, DEE	
STREET ADDRESS	802 E ANNIE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ROSE, JUDITH	
STREET ADDRESS	10402 N BLVD	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Donna Stalings	
1.3 STREET ADDRESS	817 Coral St.	
1.4 CITY-ST-ZIP	Tampa, FL 33603	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

200002489553
-04/15/98--01042--006
***61.25

14. I hereby certify that the information supplied with this filing 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: [Signature] DATE: 3/31/98 818-878-3/35

CR2E037 (10/97)