

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036668

Entity Name: DEL RIO MANAGEMENT, INC.

FILED
Mar 23, 2007
Secretary of State

Current Principal Place of Business:

893 PASEO DEL RIO STREET NORTHEAST
ST. PETERSBURGE, FL 33702

New Principal Place of Business:

893 PASEO DEL RIO STREET NORTHEAST
ST. PETERSBURG, FL 33702

Current Mailing Address:

893 PASEO DEL RIO STREET NORTHEAST
ST. PETERSBURGE, FL 33702

New Mailing Address:

893 PASEO DEL RIO STREET NORTHEAST
ST. PETERSBURG, FL 33702

FEI Number: 41-2088175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITTEMORE, DONALD H
100 SOUTH AHLEY DRIVE, SUITE 1900
TAMPA, FL 33602 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: D () Delete
Name: LACEY, PHIL
Address: 893 PASEO DEL RIO STREET NORTHEAST
City-St-Zip: ST. PETERSBURGE, FL 33702

Title: D () Delete
Name: LACEY, GAIL
Address: 893 PASEO DEL RIO STREET NORTHEAST
City-St-Zip: ST. PETERSBURGE, FL 33702

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LACEY, PHIL
Address: 893 PASEO DEL RIO STREET NORTHEAST
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D (X) Change () Addition
Name: LACEY, GAIL
Address: 893 PASEO DEL RIO STREET NORTHEAST
City-St-Zip: ST. PETERSBURG, FL 33702

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: GAIL R. LACEY

D

03/23/2007

Electronic Signature of Signing Officer or Director

Date