2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 8:00 am Secretary of State

04-23-2007 90263 006 ***150.00

DOCUMENT # P03000074899 1. Entity Name DELILLA W. HARTS, P.A.					04-23-2007	90263 006 ***150	0.00	
Principal Plac	e of Rusiness	Mailing Address		 400	77471			
Principal Place of Business Mailing Address 661 A1A BLVD 661 A1A BLVD								
SAINT AUGUSTINE, FL 32080 SAINT AUGUSTINE, FL 32080		2080						
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Principal Place of Business - No P.O. Box # 3. Mailing Address								
1821 Asturias St. 1821 Asturias			25 St	I IRAIIRAS IA	87187 IIIN 8719 8711 781	(A MASII IMBE) MIMBI IMISE IMIIM IM	(1291 (1 1994	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		03242007	Chg-P	CR2E034 (12/06)		
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City & State City & State		ino FI	4. FEI Number 20-008			pplied For ot Applicable		
300 AC	Country	Zip	Country		of Status Desired	\$8.75 Add	ditional	
-320	80	32080				Fee Require	d- — - ·	
	6. Name and Address of Current	Registered Agent	Name	7. Name and	Address of New R	legistered Agent		
HARTS, D	ELILLA W		1741110					
661 A1A BLVD			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
SAINT AU	GUSTINE, FL 32080		1021	1001 D =1 S1				
			1021	Hostur	tc ex	. Zin Cod		
			City S+	. Augus	tine	FL Zip God	2080	
	named entity submits this statement for	r the purpose of changing its re	egistered office or rec	gistered agend, or bo	h, in the State of Flo	orida. I am familiar with,	and accept	
the obligations of registered agent.								
SIGNATURE Signature, typed or contried 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.								
				\$5.00 May Be Added to Fees				
		Trust Fund Contrib		Added to Fees	CHANGES TO OFF	ICERS AND DIRECTOR	S (N 11	
After Ma	OFFICERS AND PSTD	Trust Fund Contrib	oution.	Added to Fees	CHANGES TO OFF	ICERS AND DIRECTOR:	S (N 1)	
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After Ma 10. TITLE NAME STREET ADDRESS	OFFICERS AND PSTD HARTS, DELILLA W 1821 ASTURIAS STREET	Trust Fund Contrib DIRECTORS	11. IITLE NAME STREET ADDRESS	Added to Fees	CHANGEŠ TO OFF			
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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.