

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2005 8:00 am
Secretary of State

04-27-2005 90336 030 ***150.00

DOCUMENT # P04000032997

1. Entity Name
DELAND TAXI, INC.



Principal Place of Business
153 CRYSTAL OAK DR.
DELAND, FL 32720

Mailing Address
153 CRYSTAL OAK DR.
DELAND, FL 32720

66024566



07062005 Chg-P CR2E034 (10/03)

4. FEI Number **20 1134080** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

FOSTER, ROBERT R
108 W RICH AVE
DELAND, FL 32720

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **CUTTS, SANFORD E**
STREET ADDRESS **153 CRYSTAL OAK DR.**
CITY-ST-ZIP **DELAND, FL 32720**

TITLE **D** ☐ Delete
NAME **CUTTS, JUANITA E**
STREET ADDRESS **153 CRYSTAL OAK DR**
CITY-ST-ZIP **DELAND, FL 32720**

TITLE **D** ☐ Delete
NAME **MORLEY, PAUL**
STREET ADDRESS **8100 S HARTFORD RD**
CITY-ST-ZIP **BALTIMORE, MD**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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.

SIGNATURE: **Sanford E Cutts**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-10-5 386-822-9745
Date Daytime Phone #

July 19, 2005
153 Crystal Oak Dr.
Deland, FL 32720

ATTACHMENT

PD4000032997

66024560

To Division of Corporations:

This letter is in reference to PD4000032997.

I'm requesting a waiver of the \$400.00 late fee due to the letter being sent to an incorrect address. I did not receive the original letter dated May 14, 2005 until July 2, 2005. The letter was sent to 502 S. Adelle where I haven't lived since April, 2004. I must say it was strictly by chance that I received it at all. I'm requesting also that all information be corrected so that the correct address of 153 Crystal Oak Dr. appears.

Thank You
Deland Gas
Sanford & Co.

P.S. You're already received & cash the check for \$450.00 which was sent April 22, 2005. Check # 1812.