

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 20, 2007 8:00 am**  
**Secretary of State**

08-20-2007 90056 046 \*\*\*150.00

**DOCUMENT # P04000100400**

1. Entity Name  
**DELPH ENTERPRISES, INC.**



Principal Place of Business Mailing Address  
**1266 AQUILA LOOP 1266 AQUILA LOOP**  
**CELEBRATION, FL 34747 US CELEBRATION, FL 34747 US**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08032007 Chg-P CR2E034 (12/06)

4. FEI Number  
**APPLIED FOR**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COLLINS, TERENCE J**  
**7824 W. SANDLAKE RD.**  
**ORLANDO, FL 32819**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME COLLINS, TERENCE J  
STREET ADDRESS 1266 AQUILA LOOP  
CITY-ST-ZIP CELEBRATION, FL 34747

TITLE PD ☒ Change ☐ Addition  
NAME COLLINS, TERENCE J  
STREET ADDRESS 1234 GOLDEN CANNA LANE  
CITY-ST-ZIP CELEBRATION, FL 34747

TITLE VPD ☐ Delete  
NAME COLLINS, DEBRA  
STREET ADDRESS 1266 AQUILA LOOP  
CITY-ST-ZIP CELEBRATION, FL 34747

TITLE VPD ☒ Change ☐ Addition  
NAME COLLINS, DEBRA  
STREET ADDRESS 1234 GOLDEN CANNA LANE  
CITY-ST-ZIP CELEBRATION, FL 34747

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**TERENCE J. COLLINS**

Date

**08/17/07 457 566 1826**

Daytime Phone #

ATTACHMENT

40129655

**Delph Enterprises Inc  
1234 Golden Canna Lane  
Celebration  
FL34747  
Tel/Fax 407 566 1826**

07/23/07

**Florida Dept of State  
Division of Corporations  
PO Box 8700  
Tallahassee  
Florida 32314**

**Dear Sir/Madam**

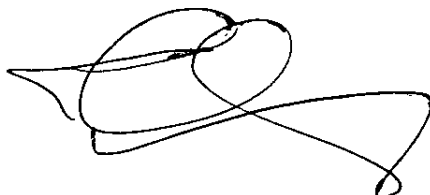
**Re: Filing of Annual Report Online  
Document PO4000100400**

**Enclosed postcard with note of change of address. Please note for your records new address is as above and NOT 1266 Aquila Loop – we moved from that address early January 2007.**

**We only received your important notice last week and therefore request that you kindly abate the penalty of \$400.00.**

**Please find enclosed payment of \$150.00.**

**Yours sincerely**

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke extending to the right.

**Mr T Collins (President)**