

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102982

Entity Name: D.E.L. AND COMPANY INC.

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

3197 SE DOMINICA TERR.  
STUART, FL 34997 US

## New Principal Place of Business:

## Current Mailing Address:

1140 B SW PALM CITY RD.  
STUART, FL 34994 US

## New Mailing Address:

FEI Number: 20-3204723

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DICKINSON, SUZANNE L  
1140 B SW PALM CITY RD.  
STUART, FL 34994 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: DICKINSON, STAN  
Address: 1140 B SW PALM CITY RD.  
City-St-Zip: STUART, FL 34994 US

Title: VP ( ) Delete  
Name: DICKINSON, SUZANNE L  
Address: 1140 B SW PALM CITY RD.  
City-St-Zip: STUART, FL 34994 US

Title: TR ( ) Delete  
Name: DICKINSON, SARAH B  
Address: 1140 B SW PALM CITY RD.  
City-St-Zip: STUART, FL 34994 FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STAN DICKINSON

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date