


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90191 021 \*\*\*150.00

<b>DOCUMENT # P17757</b> 1. Entity Name <b>DELTA FUNDING CORPORATION</b>					
Principal Place of Business <b>1000 WOODBURY RD. SUITE 200 WOODBURY, NY 11797 US</b>			Mailing Address <b>1000 WOODBURY RD. SUITE 200 WOODBURY, NY 11797 US</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>11-2609517</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD MILLER, SIDNEY A. 10 BALLANTINE LANE GREAT NECK, NY 11024 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILLER, HUGH 80 COVES RUN WOODBURY, NY 11797 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD BLASS, RICHARD 22 WHARTON PLACE MELVILLE, NY 11747 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SSVP MILLER, MARC E 39 CHERRY LANE SYOSSET, NY 11791 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S/SVP/D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP MILLER, LEE 16 HUNTING HILL ROAD WOODBURY, NY 11797 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>EVP/D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	See additional page <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<b>Richard Blass</b> <b>Executive Vice President</b>		
Date			4/20/2006 <small>Daytime Phone #</small>		

# ATTACHMENT

40066656

## 2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P17757

### ADDITIONAL OFFICERS

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY STREET ZIP**

**SVP**  
Franklin Pellegrin, Jr.  
67 Aberdeen Road  
Smithtown NY 11787

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY STREET ZIP**

**SVP**  
Randall Michaels  
114 Asharoken Road  
Northport NY 11768

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY STREET ZIP**

**SVP**  
Dean Kramer  
46 Plymouth Avenue  
Mt. Sinai NY 11766

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY STREET ZIP**

**SVP**  
Carla Biancaniello  
50 Legenda Circle  
Melville NY 11747

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY STREET ZIP**

**SVP**  
William Walter  
59 Cedar Road  
East Northport NY 11731

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY STREET ZIP**

**SVP**  
Richard Iasparo  
160 Pace Drive South  
West Islip NY 11795

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY STREET ZIP**

**SVP**  
Christopher Donnelly  
42 Lyndon Place  
Melville NY 11747

# ATTACHMENT

40066656

SVP # P17757

TITLE  
NAME  
STREET ADDRESS  
CITY STREET ZIP

Sarojini Baltrus  
5 Wayne Court  
Merrick NY 11566

TITLE  
NAME  
STREET ADDRESS  
CITY STREET ZIP

SVP  
Carl Monsour  
312 Buffalo Ridge Road  
McMurray PA 15317

TITLE  
NAME  
STREET ADDRESS  
CITY STREET ZIP

SVP  
Obiora Egbuna  
8820 Cavonnier Lane  
Charlotte NC 28216