

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34139

FILED
Apr 29, 2004
Secretary of State

Entity Name: DELTA MERCHANDISING, INC.

Current Principal Place of Business:

4902 W. WATERS AVENUE
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

4902 W. WATERS AVENUE
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 57-0874341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MUNDAY, CHRISTOPHER B
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634 US

Title: VTD () Delete
Name: MCPHERSON, N. LARRY
Address: 4902 S. WATER AVENUE
City-St-Zip: TAMPA, FL 33634 US

Title: SN () Delete
Name: WILLIAMS, GREGORY
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634 US

Title: S () Delete
Name: COHAN, ROBIN
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634

Title: V () Delete
Name: CLENNEY, CAROL A
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634

Title: S () Delete
Name: CASTILLO, KAREN
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAGAN, MICHAEL
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634 US

Title: VT (X) Change () Addition
Name: COHAN, ROBIN
Address: 4902 S. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634 US

Title: VS (X) Change () Addition
Name: CASTILLO, KAREN
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634 US

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

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

Title: S (X) Change () Addition
Name: MARLOW, JANE
Address: 4902 W. WATERS AVENUE
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN S CASTILLO

VS

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date