## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

DELTA AIRPORT CONSULTANTS, INC.

FILED Mar 12 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address				. idaniage jad mitt gibre engie fifaje difte debet difte fifte fiber fibit Bibit Bibit		
7333 WHITEPINE ROAD RICHMOND VA 23237		7333 WHITEPINE ROAD RICHMOND VA 23237				DO NOT WRITE IN THIS SI	PACE	
						3. Date Incorporated or Qualified	- AOL	
						07/15/1991		
2. Principal Pi	ace of Business	2a. Mailing Address			•	4. FEI Number	Applied For	
21		26				54-1214032	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & State		· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	2ηρ <b>29</b>	Country 30			<b>8.</b> This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes 🛣 No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent		
CT CORPORATION SYSTEM				81	Name			
1200 S. PINE ISLAND ROAD PLANTATION FL 33324				82	Street Address (P.O. Box Number is Not Acceptable)			
				83				
				64	City	FL	85 Zip Code	
						ration submits this statement for the purpose of ones to board of directors. I hereby accept the appoint		

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition BEALE, EDWARD L. NAME 1.2 NAME 10810 BAY HILL CLUB DR STREET ADDRESS 1.3 STREET ADDRESS CHARLOTTE NC CITY-ST-ZIP 1.4 CHTY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition LAMB, CHARLES D., SR. NAME 2.2 NAME **624 N BACONS CHASE** STREET ADDRESS 2.3 STREET ADDRESS HOPEWLL VA CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MOODY, KENNETH W. NAME 3.2 NAME 1417 MATTHEWS PLANTATION DRIVE STREET ADDRESS 3.3 STREET ADDRESS MATTHEWS NO CITY-ST-ZIP 3.4. CITY - ST - ZIP DELFTE Addition TITLE 4.1 TITLE BRAMMER, KENNETH W NAME 4. 2 NAME 8017 WEST MOUNT BELLA RD STREET ADDRESS 4.3 STREET ADDRESS RICHMOND VA CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 51 TITLE NIXON, JAMES D JR NAME 5.2 NAME 4501 OLD MESA DRIVE STREET ADDRESS 5.3 STREET ADDRESS RICHMOND VA CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change X Addition 61 TITLE NAME 6.2 NAME Susan E. Winslow STREET ADDRESS

6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Godes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information proof is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an after employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in CITY-ST-ZIP I hereby certify that the information s indicated on this annual report or su report is true and accurate and officer or director of the co Block 12 or Block 13 if of

SIGNATURE:

Foh 72.1998