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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000024873 (0)

DELAVAN, INC.

FILED Apr 24 1998 8:00am Secretary of State

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a.		A 10 A 11			}	II QIQQI IBIZI IBBBB IIII IBBI	
Principal Place of Business Mailing Address							
SPORTS P		SPORTS PAGE PUB 13344 66TH ST N					
LARGO FL		LARGO FL 34643			DO NOT WRITE IN THIS SPACE		
US		US			Date Incorporated or Qualified 04/05/1993		
2. Principa	al Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26			59-3177438	Not Applicable	
Suite, A	.pt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6, Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Žip	Country	Ζφ	Coun	itry	8. This corporation owes or has paid the cu	rrent year Intangible	
24	25	29	30			Yes No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent	
j	MANCUSO, MARILEE		1	81 Name			
	21227 US 19 #146-D		1	32 Street Add	ress (P.O. Box Number is Not Acceptable)		
	CLEARWATER FL 34625			Stroot rigg	, see (. 10, 20, 11dinos, 15 not vice options)		
•			1	83			
			ļ.	04 00		lon 7: Oada	
			'	B4 City	FL	85 Zip Code	
office of agent.	I am familiar with, and accept the oblig	gations of, Section 607.0505, Fi	orida Statu	by the corporalites. Agent signature requi	tion's board of directors. I hereby accept the ap	pointment as registered	
12.		ND DIRECTORS	13.	Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	DPST	DELETE	1.1 1111	E T	ADDITIONOJON A TOLETO A TO	Change Addition	
NAME	MANCUSO, MARILEE	·	1.2 NAN	ME :		·	
STREET ADDRES	A			EET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL			Y - ST - ZIP			
TITLE	V	DELETE	211 11			☐ Change ☐ Addition	
NAME	MANCUSO, MARILEE	<u></u>	2 2 NAM			—	
				EET ADDRESS			
STREET ADDRES	©LEARWATER FL 34825						
CITY-ST-ZIP	CLEARWAIGH FL 34023	DELETE	3.1 TITL	Y-ST-ZIP		Change Addition	
		OLLELIA	3.2 NAN			— change — — recenter	
NAME STREET ADDRESS	22			EET ADDRESS			
STREET ADDRES	33			Y-ST-ZIP			
CITY-ST-ZIP TITLE		DELETE	4.1 T(T)			Change Addition	
•			4. 2 NA				
NAME STORET ADODE	ce	•					
STREET ADDRES	»			EET ADDRESS			
CITY-ST-ZIP		DELETE	4.4 C(1) 5.1 T(T)	Y-ST-ZIP		Change Addition	
TITLE						7.100 C. 7.100(101)	
NAME			5.2 NAM				
STREET ADDRES	SS			EET ADDRESS			
CITY-ST-ZIP		T OF FTE		Y-ST-ZIP		Change Addition	
TITLE		☐ DELETE	6.1 1111			Change Addition	
NAME			. 6.2 NAN				
STREET ADDRES	SS			IEET ADDRESS			
CITY-ST-ZIP			6.4 CIT	Y-ST- Z IP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

4/20/98

8/3 528-2430