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FILED

Apr 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092867 (7)

1. Corporation Name
DELTA REGIS TOOLS, INC.

Principal Place of Business

3315 INDUSTRIAL 25 ST
FT PIERCE FL 34946

Mailing Address

3315 INDUSTRIAL 25 ST
FT PIERCE FL 34946

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

DEADMAN, THOMAS G
3315 INDUSTRIAL 25 ST
FT PIERCE FL 34946

3. Date Incorporated or Qualified

01/01/1996

4. FEI Number

65-0635386

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DEADMAN, THOMAS G
STREET ADDRESS 3120 N A1A PH3-3
CITY-ST-ZIP FT PIERCE FL

TITLE ☒ DELETE

NAME CLARK, ROBERT G
STREET ADDRESS 12 KENDALE, LEVERSTOCK GREEN
CITY-ST-ZIP HEMEL HEMPSTEAD HE

TITLE ☐ DELETE

NAME DEADMAN, ROBERT N
STREET ADDRESS 2035 AMHERST HEIGHTS COURT, UNIT 25
CITY-ST-ZIP BURLINGTON ON

TITLE ☒ DELETE

NAME CLARK, RICHARD E
STREET ADDRESS 44 CROSSFELL RD
CITY-ST-ZIP HEMEL HEMPSTEAD HE

TITLE ☒ DELETE

NAME CLARK, PAUL R
STREET ADDRESS UNIT 32, BOURNE END MILLS
CITY-ST-ZIP HEMEL HEMPSTEAD HE

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME DEADMAN, THOMAS G.
1.3 STREET ADDRESS 4702 EAGLE DRIVE
1.4 CITY-ST-ZIP FT. PIERCE, FL 34951

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME SECRETARY/TREASURER
DEADMAN, CONSTANCE I.
2.3 STREET ADDRESS 4702 EAGLE DRIVE
2.4 CITY-ST-ZIP FT. PIERCE, FL 34951

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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; the recorder or Justice 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.

SIGNATURE

THOMAS G. DEADMAN

4/15/98 (SH) 465-4302

CR2E034 (10/97)