

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90172 047 ***158.75

DOCUMENT # P96000083606

1. Entity Name
DELTA DURABLES, INC.

Principal Place of Business 2800 NAVY BLVD SUITE 4 PENSACOLA FL 32505	Mailing Address 125 W ROMANA ST SUITE 400 PENSACOLA FL 32501-5847
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 2 N. Palafox St. Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

4. FEI Number 59-3405478	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BELL, SCOTT J
125 W ROMANA ST, SUITE 400
PENSACOLA FL 32501

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Numbers Not Acceptable)
2 N. Palafox St.
 City **FL** Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BELL, SCOTT J 125 W. ROMANA ST. STE 400 PENSACOLA FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 N. Palafox St.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FERGUSON, KEN 125 W. ROMANA ST. STE 400 PENSACOLA FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 N. Palafox St.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOSTER, DANA R 125 W. ROMANA ST. STE 400 PENSACOLA FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 N. Palafox St.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TOLAN, JOHN J J 125 W. ROMANA ST. STE 400 PENSACOLA FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 N. Palafox St.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TREHERN, EDWARD 125 W. ROMANA ST. STE 400 PENSACOLA FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 N. Palafox St.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ST. PE, GERALD 125 W. ROMANA ST. STE 400 PENSACOLA FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 N. Palafox St.

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED **1/10/02 850-432-0650**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)