

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000093228

FILED
Apr 01, 2009
Secretary of State

Entity Name: THE DE L. M. CORPORATION

Current Principal Place of Business:

359 PENROSE CIRCLE
ENGLEWOOD, FL 34223

New Principal Place of Business:

359 PENROSE CIRCLE
ENGLEWOOD, FL 34223 US

Current Mailing Address:

359 PENROSE CIRCLE
ENGLEWOOD, FL 34223

New Mailing Address:

359 PENROSE CIRCLE
ENGLEWOOD, FL 34223 US

FEI Number: 65-0875895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTERS, DE ARLE L
359 PENROSE CIRCLE
ENGLEWOOD, FL 34223 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: PVST () Delete
Name: MASTERS, DE ARLE L MR.
Address: 359 PENROSE CIRCLE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: MASTERS, DE ARLE L MR.
Address: 359 PENROSE CIRCLE
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: MASTERS, DE ARLE L MR.
Address: 359 PENROSE CIRCLE
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: D (X) Change () Addition
Name: MASTERS, DE ARLE L MR.
Address: 359 PENROSE CIRCLE
City-St-Zip: ENGLEWOOD, FL 34223 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DEARLE L MASTERS

PVST

04/01/2009

Electronic Signature of Signing Officer or Director

Date