

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000093247

1. Entity Name

DELTA COMMUNICATIONS OF FLORIDA, INC.

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90103 025 ***150.00

Principal Place of Business

Mailing Address

2727 ULMERTON RD.
SUITE 230
CLEARWATER FL 33762

2727 ULMERTON RD.
SUITE 230
CLEARWATER FL 33762

2. Principal Place of Business

4465 W. Gandy Blvd.

Suite, Apt. #, etc.
Suite #800

City & State
Tampa, Florida

Zip

33611

Country

USA

3. Mailing Address

4465 W. Gandy Blvd.

Suite, Apt. #, etc.

Suite #800

City & State
Tampa, Florida

Zip

33611

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3542478

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COOPER, MILLER M
2727 ULMERTON RD.
SUITE 230
CLEARWATER FL 33762

7. Name and Address of New Registered Agent

Name Cooper, Miller M.

Street Address (P.O. Box Number is Not Acceptable)
4465 W. Gandy Blvd.

Suite #800

City Tampa

FL

Zip Code
33611

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Miller M. Cooper

4/25/01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D
NAME COOPER, MILLER M
STREET ADDRESS 2727 ULMERTON ROAD SUITE 230
CITY-ST-ZIP CLEARWATER FL 33762 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME Cooper, Miller M.
STREET ADDRESS 4465 W. Gandy Blvd., Suite #800
CITY-ST-ZIP Tampa, FL 33611

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Miller M. Cooper

Date

4/25/01

Daytime Phone #

(813) 839-7242

CR2E034 (10/00)