

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038319

FILED
Aug 18, 2006
Secretary of State

Entity Name: DAL CORP.

Current Principal Place of Business:

3580 SHAW BOULEVARD
100
NAPLES, FL 34117

New Principal Place of Business:

Current Mailing Address:

3580 SHAW BOULEVARD
100
NAPLES, FL 34117

New Mailing Address:

FEI Number: 65-0930759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DADDIO, LORNA
3580 SHAW BOULEVARD
NAPLES, FL 34117 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHAW, JAMES R
Address: 3580 SHAW BLVD
City-St-Zip: NAPLES, FL 34117

Title: TD () Delete
Name: DEMERE, LEON
Address: 10 AMMON DR
City-St-Zip: MANCHESTER, NH 03103

Title: SD () Delete
Name: DOWNES, DENNIS
Address: 3580 SHAW BLVD
City-St-Zip: NAPLES, FL 34117

Title: D () Delete
Name: LARDIERE, ERIC
Address: 10 AMMON DR
City-St-Zip: MANCHESTER, NH 03103

Title: AS () Delete
Name: EDWARDS, LEE A
Address: 3580 SHAW BOULEVARD
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES R SHAW

GP

08/18/2006

Electronic Signature of Signing Officer or Director

_____ Date