

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90022 046 ***150.00

DOCUMENT # P99000110102

1. Entity Name

DELPHI CORPORATION

Principal Place of Business

**3402 APALACHEE PKWY.
 SUITE G
 TALLAHASSEE FL 32311**

Mailing Address

**3402 APALACHEE PKWY.
 SUITE G
 TALLAHASSEE FL 32311**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3625023

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MICHELE JOHNSTON, JEANNE
 3402 APALACHEE PKWY.
 TALLAHASSEE FL 32311**

7. Name and Address of New Registered Agent

Name

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

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

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

(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) ☐

**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. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **PC**
 STREET ADDRESS **JOHNSTON, JASON**
 CITY-ST-ZIP **605 OAKWOOD TRAIL
 CRAWFORDVILLE FL 32327**

TITLE ☐ Delete
 NAME ~~Joshua Harmon~~
 STREET ADDRESS ~~3909 Reserve Dr. Apt. 422~~
 CITY-ST-ZIP ~~Tallahassee FL, 32311~~

TITLE ☐ Delete
 NAME ~~Eric McNair~~
 STREET ADDRESS ~~74 Ocean View Dr.~~
 CITY-ST-ZIP ~~Crawfordville, FL 32327~~

TITLE ☐ Delete
 NAME ~~Lauren Hutto~~
 STREET ADDRESS ~~56 Guy Strickland Rd.~~
 CITY-ST-ZIP ~~Crawfordville FL, 32327~~

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
 NAME **BOD**
 STREET ADDRESS **Nicole Bastys**
 CITY-ST-ZIP **68-38 Yellowstone Blvd. # B13
 Wood Forrest Hills, NY 11375**

TITLE ☐ Change ☒ Addition
 NAME **Chairman- BOD**
 STREET ADDRESS **Joshua Harmon**
 CITY-ST-ZIP **3909 Reserve Dr. Apt 422
 Tallahassee FL, 32311**

TITLE ☐ Change ☒ Addition
 NAME **BOD**
 STREET ADDRESS **Eric McNair**
 CITY-ST-ZIP **74 Ocean View Dr.
 Crawfordville FL, 32327**

TITLE ☐ Change ☒ Addition
 NAME **BOD**
 STREET ADDRESS **Lauren Hutto**
 CITY-ST-ZIP **56 Guy Strickland Rd.
 Crawfordville FL, 32327**

TITLE ☐ Change ☒ Addition
 NAME **BOD**
 STREET ADDRESS **Mary Harris McWaters**
 CITY-ST-ZIP **643 1/2 Acker St. NW
 Washington DC 20002**

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

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:

Jason M. Johnston
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 19, 2002

Date

850.566.0316

CR2E034 (9/01)