

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. McNamee  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S91609 (5)

1. Corporation Name

DELTA INVESTMENT REAL ESTATE & DEVELOPMENT, INC.



Principal Place of Business

1409 SE 47TH TERR  
CAPE CORAL FL 33904

Mailing Address

1409 SE 47TH TERR  
CAPE CORAL FL 33904

2. Principal Place of Business

21 17220 PRIMAVERA CIRCLE

Suite, Apt. #, etc.

22

City & State

23 CAPE CORAL, FL

Zip

24 33909

Country

25

2a. Mailing Address

26 17220 PRIMAVERA CIRCLE

Suite, Apt. #, etc.

27

City & State

28 CAPE CORAL, FL

Zip

29 33909

Country

30

9. Name and Address of Current Registered Agent

MEADE, MICHAEL L.

1409 SE 47TH TERRACE

CAPE CORAL FL 33904

3. Date Incorporated or Qualified

11/04/1991

3a. Date of Last Report

04/03/1995

4. FET Number

65-0294136

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83 17220 PRIMAVERA CIRCLE

84 City

CAPE CORAL

FL

85 Zip Code

33909

11. Pursuant to the provisions of Sections 607.01(2) and 607.15(9), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.01(2), Florida Statutes.

SIGNATURE

Michael A. Meade

April 3, 1996

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D  
NAME MEADE, MICHAEL L.  
STREET ADDRESS 17220 PRIMAVERA CIRCLE  
CITY-ST-ZIP CAPE CORAL FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 transferor or transferee (past or present) to establish the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael A. Meade Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 3, 1996 941-772-956

CR2E034 (12/95)