

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000002812

**Entity Name:** DELTA SERVICES OF INDIANA, INC.

**Current Principal Place of Business:**

4177 N. EMS BLVD  
GREENFIELD, IN 46140

**FILED**  
**Feb 11, 2016**  
**Secretary of State**  
**CC8135235036**

**Current Mailing Address:**

PO BOX 501796  
INDIANAPOLIS, IN 46250 US

**FEI Number: 35-2016859**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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

**Officer/Director Detail :**

Title	P	Title	S
Name	BEGO, DAVID	Name	BEGO, BARBARA
Address	PO BOX 501796	Address	PO BOX 501796
City-State-Zip:	INDIANAPOLIS IN 46250	City-State-Zip:	INDIANAPOLIS IN 46250

*I hereby 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 all other like empowered.*

**SIGNATURE: BARBARA BEGO**

**SECRETARY**

**02/11/2016**

Electronic Signature of Signing Officer/Director Detail

Date