

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000024951

1. Entity Name
DIAMOND PROPERTIES SOUTH, LLC



Principal Place of Business
**9300 LAKEBEND PRESERVE COURT
BONITA SPRINGS, FL 34135 US**

Mailing Address
**9300 LAKEBEND PRESERVE COURT
BONITA SPRINGS, FL 34135 US**



03022006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0954684

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DIAMOND, ALAN B
9300 LAKEBEND PRESERVE COURT
BONITA SPRINGS, FL 34135**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DIAMOND, ALAN B
STREET ADDRESS	9300 LAKEBEND PRESERVE COURT
CITY-ST-ZIP	BONITA SPRINGS, FL 34135
TITLE	MGRM
NAME	SZYMCZAK, ROBERT A
STREET ADDRESS	9687 CYPRESS HAMMOCK CIR., UNIT 201
CITY-ST-ZIP	BONITA SPRINGS, FL 34135
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3/27/06 339-994-0118