FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 755 80 6 1. Corporation Name

DIAMONDHEAD HOMEDWHERS ASSOC.

Para de la constitución de la co

96 AUG 19 PN 1:36

יייי			/	NC.		
Principal Place of Business Mailing Address					\$00001925425 -08/19/96-01018-309	
2	1826 FAR TALLAHASS	LANE, FL 3:	23 <i>0 1</i>		まきます。 3. Date incorporated or Qualified の / し タ / タ を / 4. FEI Number	(1,2% *****(1,2%) 3a. Date of Last Report 08/04/95
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
2. Principal Place of Busiless		26			15-9-24028-98	Not Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27				Fee Required
City & State		C ty & State			Etection Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	Country	28 Zip	Cour	ntry	8. This corporation has liability for	
Zip	25	29	30	,		Yes No
24	9. Name and Address of Cu		_1=1		10. Name and Address of New Re	egistered Agent
	S. Hame and Houses of the			81 Name		'
			}	B2 Street Add	ress (P.O. Box Number is Not Accepta	ble)
	PLANAER M	POWERS				
K	10117KD M	LOWERS	701	83		
-			, ,	84 City		FL 85 Zip Code
	TALLA	3230/			the state and to the	
					poration submits this statement for the tion's board of directors. I hereby acce	pt the appointment as registered
agent I ar	m familiar with, and accept the	obligations of, Section 617 0503	Florida Stati	utes	of : olana	
SIGNATURE _	Signature typed or phritist name of register	returned the Participate.	No TE Hegistere	Ager I Signal'ute respe	ik a when re-estation	DA'E
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	
111.EP. D.	1 - 11-110	ESSY (PEES	1170	i E		Change Addition
NAME.	JOE HERN	1 1 1 1 1	12 NA	ME		
STREET ADDRESS	2836 PAR		1351	REET ADDRESS		
CHTY-ST ZIP	TALLA 3	7086		TY ST-7IP		Change Addition
TITLE	RICHARD	RHOADES DELETE	2 1 [1]			[
NAME	2835 DIAV	ONDHEAD EAST	- 25 M			
STREET ADDRESS				REET ADDRESS		
CITY ST-ZIP	TALLA		2 4 U	ITY - ST - ZIP		Change Addition
TITLE D. VP	KEN SEZE	ERS =	37 N	l l		
NAME	2826 PAI	e LANE		REET ADDRESS		
STREET ADDRESS CITY - ST - ZIP	TALLA			ITY-ST ZIP		
TITLE D.	0	DELETE	4 1 Ti			Change Addition
NAMES/T	ROBIN S	ELLERS	4 2 h	AME		
STREET ADDRESS	2824 PAR		43S	FREE 1 ADDRESS		
CHTY ST-ZIP	TALLA	32301		ITY-ST ZIP		Change Addition
TITLE	,	DELETE				Change Addition
NAME			5 2 N	Į.		
STREET ADDRESS				TREET ADORESS		
CITY-ST ZIP		- T-2.22		ITY - ST - ZIP		Change Addition
TITLE		DELETE				onlings / volumen
NAME			6 2 N			\sim
STREET ADDRESS				TREET ADDRESS		St
CITY-ST-ZIP			640	ITY - ST - ZIP		- 440 0740 W. Elevido Brando

14. Ido hereby certify that the information supplied with this filing is voluntarily furn-shed and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statute 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 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 617, Florida States that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address