

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 715335

**Entity Name:** DIANE TERRACE, INC.

**Current Principal Place of Business:**

7124 NORTH NOB HILL ROAD  
TAMARAC, FL 33321

**Current Mailing Address:**

C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 NORTH NOB HILL ROAD  
TAMARAC, FL 33321 US

**FEI Number:** 59-1351241

**Certificate of Status Desired:** No

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

CONSOLIDATED COMMUNITY MANAGEMENT  
C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 NORTH NOB HILL ROAD  
TAMARAC, FL 33321 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:** JAMES MILES

07/18/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name BAILEY, MAUREEN  
Address C/O CONSOLIDATED COMMUNITY  
MANAGEMENT  
7124 NORTH NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

Title TREASURER  
Name DADDARIO, ANGELA  
Address C/O CONSOLIDATED COMMUNITY  
MANAGEMENT  
7124 NORTH NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

Title SECRETARY  
Name ALCI, OSCAR  
Address C/O CONSOLIDATED COMMUNITY  
MANAGEMENT  
7124 NORTH NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

Title PRESIDENT  
Name NORIN, JOHN  
Address C/O CONSOLIDATED COMMUNITY  
MANAGEMENT  
7124 NORTH NOB HILL ROAD  
City-State-Zip: TAMARAC FL 33321

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN NORIN

PRESIDENT

07/18/2023

Electronic Signature of Signing Officer/Director Detail

Date