

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 317596

**Entity Name:** DIMARE HOMESTEAD, INC.

**Current Principal Place of Business:**

258 N.W. FIRST AVENUE  
FLORIDA CITY, FL 33034

**Current Mailing Address:**

258 N.W. FIRST AVENUE  
FLORIDA CITY, FL 33034 US

**FEI Number:** 59-1204511

**Certificate of Status Desired:** No

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

SACHER, CHARLES P.  
2655 LEJEUNE RD  
SUITE 1101  
CORAL GABLES, FL 33134 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 PD  
Name DI MARE, PAUL J.  
Address 258 NW 1ST AVENUE  
City-State-Zip: FLORIDA CITY FL 33034

Title S  
Name DRYER, DAVID  
Address TWO SEAPORT LANE  
City-State-Zip: BOSTON MA 02210-2028

Title T  
Name DI MARE, THOMAS F.  
Address P.O. BOX 517, NA  
City-State-Zip: NEWMAN CA 95360

Title DV  
Name DIMARE, SCOTT M  
Address 258 NW 1ST AVENUE  
City-State-Zip: FLORIDA CITY FL 33034

Title DASV  
Name DIMARE, ANTHONY J  
Address 258 NW 1ST AVENUE  
City-State-Zip: FLORIDA CITY FL 33034

*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:** JAY HILLMAN

**SR ACCOUNTANT**

**01/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date