**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

PROFIT CORPORATION ANNUAL REPORT

**1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **181530** **(7)**

1. Corporation Name
**DIAMOND M. RANCH, INC.**

Principal Place of Business
**1641 JORDAN TERRACE**
**DELTONA FL 32725-0909**

Mailing Address
**1641 JORDAN TERRACE**
**DELTONA FL 32725-0909**

3. Date Incorporated or Qualified: **11/08/1954**
3a. Date of Last Report: **05/25/1995**

2. Principal Place of Business
21 1641 Jordan Terr
Suite, Apt. #, etc.
22 Deltona
City & State
23 Fla
Zip 24 32725
Country 25 Volusia

2a. Mailing Address
26 1641 Jordan Terr
Suite, Apt. #, etc.
27
City & State
28 Deltona Fla
Zip 29 32725
Country 30 Volusia

4. FEI Number: **59-0796095** Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
**GARGUILO, MARIE**
**1641 JORDAN TERRACE**
**DELTONA FL 32725**

10. Name and Address of New Registered Agent
81 Name: Marie Garguilo
82 Street Address (P.O. Box Number is Not Acceptable): 1641 Jordan Terr
83
84 City: Deltona FL 85 Zip Code: 32725

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE _____

12. OFFICERS AND DIRECTORS

| | | |
|---|---|---|
| TITLE | P | ☐ DELETE |
| NAME | GARGUILO, MARIE MITCHELL | |
| STREET ADDRESS | 1641 JORDAN TERRACE | |
| CITY-ST-ZIP | DELTONA FL 32725 | |
| TITLE | V | ☐ DELETE |
| NAME | MITCHELL, WILLIAM E III | |
| STREET ADDRESS | 1641 JORDAN TERRACE | |
| CITY-ST-ZIP | DELTONA FL 32725 | |
| TITLE | ST | ☐ DELETE |
| NAME | MITCHELL, CAROL D. | |
| STREET ADDRESS | 1641 JORDAN TERRACE | |
| CITY-ST-ZIP | DELTONA FL 32725 | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|---|---|
| 1.1 TITLE | ☐ Change ☐ Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | ☐ Change ☐ Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY-ST-ZIP | |
| 3.1 TITLE | ☐ Change ☐ Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | ☐ Change ☐ Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | ☐ Change ☐ Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | ☐ Change ☐ Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:** Marie Garguilo ~~3-20-96~~ 4-3-96 904 789 3019
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE NUMBER

CR2E034 (12/95)