SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** (6)307832 THE DIAMOND K CORPORATION Mailing Address Principal Place of Business P.O. BOX 2126 P.O. BOX 2126 TALLAHASSEE FL 32316 TALLAHASSEE FL 32316 3a. Date of Last Report 3. Date incorporated or Qualified 08/11/1995 08/03/1966 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-1160223 26 21 \$8.75 Additional Suite, Apt. #, elc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199 032, Country Zip Country Zψ Yes No Florida Statutes 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KINSEY, WALDO Street Address (P.O. Box Number is Not Acceptable) 2141 VICTORY GARDEN DRIVE TALLAHASSEE FL 32301 83 Zip Code 85 84 Crtv 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. CATE SIGNATURE (NOTE Registered Agent signutive required when relinitation) Storature, typed ucprinted cours of responsibilities agent and the it approaches ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/96) 13. OFFICERS AND DIRECTORS 12. Change DELETE. 111116 TITLE E034 KINSEY, WALDO NAME 2141 VICTORY GARDEN DRIVE 1.3 STREET ADDRESS STREET ADDRESS 1.4 CITY - ST - ZIP TALLAHASSEE FL 32301 Change Addition CITY-S1-ZIP DELETE 21 TITLE THILE NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 City - ST-ZIP Change Addition CITY - ST - ZIE DELETE 31 TILLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHY-ST-ZIP Change Addition CITY - ST - ZIP DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 5 1 IITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP Change \_\_\_\_ Addition DELETE 61 TITLE TITLE 6.2 NAM8 NAME 6.3 STREET ADDRESS STREET ADDRESS 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)(k). 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 ff changed, or on an attachment with an address. 6 4 CITY - ST - ZIP

SIGNATURE: SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR