2006 FOR PROFIT CORPORATION manual Report (AR)

Secretary of State DOCUMENT # 519743 03-03-2006 90124 045 ***150.00 1. Entity Name DIEMOLD MACHINE COMPANY, INC. Principal Place of Business Mailing Address 2350 BRUNER LN SE SO COMMERCIAL PK FT MYERS FL 33912 2350 BRUNER LN SE SO COMMERCIAL PK FT MYERS FL 33912 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 34-0969606 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BOEHNKE, ULRICH K. Street Address (P.O. Box Number is Not Acceptable) 2350 BRUNER LN. S. COMMERCIAL INDUSTRIAL PARK FT. MYERS FL 33912 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Addition ☐ Delete TITLE NAME BOEHNKE, ULRICH K NAME STREET ADDRESS 2350 BRUNER LANE SE STREET ADDRESS CITY-ST-ZIP FT MYERS, FL 00000 CITY-ST-ZIP ☐ Delete TITLE ☐ Chappe Addition NAME BOEHNKE, ULRICH K. NAME STREET ADDRESS 6788 DANAH CT STREET ADDRESS CITY-ST-ZIP FT MYERS FL CITY-ST-7IP THEF VP TITLE - .Change_ NAME NAME BRYAN, DONALD T STREET ADDRESS STREET ADDRESS 841 WINDING OAKS CITY-ST-ZIP PALM HARBOR FL CITY-ST-ZIP Delete TITLE ST ☐ Change ☐ Addition NAME BOEHNKE, TERESA NAME STREET ADDRESS 6788 DANAH CT STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33908 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

t hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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FILED

Mar 03, 2006 8:00 am