## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 736655** 

Apr 17, 2008 Secretary of State

Entity Name: THE DIPLOMAT ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3155 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228

**Current Mailing Address: New Mailing Address:** 

3155 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228

FEI Number: 59-1705358 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

O'DELL, KATHI 3155 GÚLF OF MEXICO DR LONGBOAT KEY, FL 34228 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD () Delete () Change () Addition

WAGAMAN, JACK Name: Name: 16624 WESTFIELD CIRCLE Address: Address: City-St-Zip: OMAHA, NE 68130 City-St-Zip:

Title: SD Title: (X) Change ( ) Addition ( ) Delete STRATTON, BARBARA Name: STRATTON, BARBARA Name:

Address: 401 S. SIXTH STREET Address: 401 S. SIXTH STREET City-St-Zip: LA GRANGE, IL 60525 City-St-Zip: LA GRANGE, IL 60525

Title: () Delete Title: 2NDV (X) Change ( ) Addition

JOLLEY, RODENY MEREK, NANCY Name: Name: Address: PO BOX 2024 Address: 57520 GEARHART LANDINT

City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: THREE RIVERS, MS 49093

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: RENOLDS, DOUGLAS Name: RENOLDS, DOUGLAS Address: 11800 S. BELL AVENUE Address: 11800 S. BELL AVENUE City-St-Zip: CHICAGO, IL 60643 City-St-Zip: CHICAGO, IL 60643

Title: () Delete Title: (X) Change ( ) Addition

NETH, JERRY NETH, JERRY Name: Name: PO BOX 1946 PO BOX 1946 Address: Address: NOKOMIS, FL 34274 City-St-Zip: City-St-Zip: NOKOMIS, FL 34274

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHI ODELL MANA 04/17/2008

Electronic Signature of Signing Officer or Director

Date