2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#771214

Entity Name: DIAMOND SHORES, INC.

FILED May 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 100 WOODLAKE CIRCLE NAPLES, FL 34114 **Current Mailing Address: New Mailing Address:** C/O W.D. KRAMER 1838 40TH TERRACE S.W. NAPLES, FL 34116 FEI Number: 59-2560240 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: **KRAUS & BALLENGER PA** 1072 GOODLETTE ROAD NAPLES, FL 34102 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VALENTINE, MICHAEL Name: Name: Address: 2408 LINWOOD AVE, SUITE 7A Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: SD () Delete Title: () Change () Addition VALENTINE, PAUL Name: Name: Address: 2408 LINWOOD AVE, SUITE 7A Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: () Delete Title: () Change () Addition STEINBERG, DAVID Name: Name: 2408 LINWOOD AVE, SUITE 7A Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: VPD () Delete FERNANDEZ, RUTH Title: Title: () Change () Addition Name: Name: 326 CEREUS DRIVE Address: Address: City-St-Zip: NAPLES, FL 34114 City-St-Zip: Title: () Delete Title: (X) Change () Addition LORA, ORIEL LORA, OSIEL Name: Name: 405 DRACENA DRIVE 405 DRACENA DRIVE Address: Address: City-St-Zip: NAPLES, FL 34114 City-St-Zip: NAPLES, FL 34114 Title: () Delete Title: () Change () Addition MARLOW, ALLAN Name: Name: Address: 305 CEREUS DRIVE Address: NAPLES, FL 34114 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL VALENTINE P 05/14/2004

JULIAN CRUZ, DIRECTOR 100 WOODLAKE CIRCLE NAPLES, FLORIDA 34114