

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771214

FILED
Apr 23, 2009
Secretary of State

Entity Name: DIAMOND SHORES, INC.

Current Principal Place of Business:

100 WOODLAKE CIRCLE
NAPLES, FL 34114 US

New Principal Place of Business:

Current Mailing Address:

C/O KRAUS & BALLENGER
1072 GOODLETTE RD N
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-2560240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAUS & BALLENGER PA
1072 GOODLETTE ROAD
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: CRUZ, JULIAN
Address: 114 ACACIA DRIVE
City-St-Zip: NAPLES, FL 34114

Title: PD () Delete
Name: STEINBERG, DAVID
Address: 2408 LINWOOD AVE, SUITE 7A
City-St-Zip: NAPLES, FL 34112

Title: SD () Delete
Name: HARMON, SAM
Address: 2408 LINWOOD AVE, SUITE 7A
City-St-Zip: NAPLES, FL 34112 US

Title: VPD () Delete
Name: BOTTINO, ALFONSE
Address: 1646 1ST AVENUE APT 18G
City-St-Zip: NY, NY 10028

Title: TD () Delete
Name: BOTTINO, GRETA
Address: 1646 1ST AVENUE APT 18G
City-St-Zip: NY, NY 10028 US

Title: D () Delete
Name: DIAZ, JOSEPH
Address: 311 CEREUS DRIVE
City-St-Zip: NAPLES, FL 34114 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID STEINBERG

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date