

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 21, 2006 08:00 AM
Secretary of State

DOCUMENT # 825928

1. Entity Name
DIAMOND GASOLINE STATIONS, INC.



Principal Place of Business

POST OFFICE BOX 291
HIGHWAY 21 NORTH
ATMORE, AL 36504-0291

Mailing Address

POST OFFICE BOX 291
HIGHWAY 21 NORTH
ATMORE, AL 36504-0291



08032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
63-0583474

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HOWELL, GORDON W
7102 CLYDESDALE DRIVE
PENSACOLA, FL 32506

**DO NOT WRITE
IN THIS SPACE**

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 \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	WHITE, ROY W., JR.
STREET ADDRESS	339 ALLEN ROAD
CITY- ST - ZIP	ATMORE, AL 36502
TITLE	P
NAME	COON, BONNIE L.
STREET ADDRESS	291 ALLEN ROAD
CITY- ST - ZIP	ATMORE, AL 36502
TITLE	S
NAME	WHITE, THOMAS A.
STREET ADDRESS	100 CYPRESS ST
CITY- ST - ZIP	ATMORE, AL 36502
TITLE	
NAME	
STREET ADDRESS	
CITY- ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST - ZIP	

U000000574907

08/22/06-80001-023 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: X *Roy W. White, Jr.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/15/06 (251) 368-9191

Date

Daytime Phone

(Roy W. White, Jr. Vice President)