2005 FOR PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE:

LATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary of State 02-02-2005 90034 041 ***150.00 DOCUMENT # F03000003083 BLACK DIAMOND GROUP, INC. A DELAWARE CORPORATION Principal Place of Business Mailing Address 40010460 3505 SILVERSIDE RD ONE TAMPA CITY CENTER **SUITE 2880** 206 PLAZA CENTRE BLDG TAMPA, FL 33602 WILMINGTON, DE 19810 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 42-1596561 Not Applicable Country -Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11 TITLE TITLE ☐ Delete K Change BUCHANAN, KIM P NAME NAME One Tampa City Center, Suite 2880 STREET ADDRESS 100 NORTH TAMPA ST., SUITE 3675 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602 CITY-ST-ZIP Tampa, FL 33602 CCEO X Change TITLE ☐ Delete TITLE ROTHMAN, ROBERT NAME NAME STREET ADDRESS 100 NORTH TAMPA STREET, SUITE 3675 STREET ADDRESS One Tampa City Center, Suite 2880 CITY-ST-ZIP TAMPA, FL 33602 CITY-ST-ZIP Tampa, FL 33602_ TITLE Delete TITLE Change NAME BEALE, CHARLES L NAME One Tampa City Center, Suite 2880 STREET ADDRESS 100 NORTH TAMPA STREET, SUITE 3675 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602 CITY-ST-7IP Tampa, FL 33602 TITLE vs ☐ Delete TITLE ☐ Change Addition VOSS, DEANNA NAME NAME STREET ADDRESS 3505 SILVERSIDE ROAD, 206 PLAZA CENTER BLD STREET ADDRESS CITY-ST-7IP WILMINGTON, DE 19810 CITY-SI-7IP TITLE VCGC ☐ Delete TITLE Change ☐ Addition GIBBS, THOMAS E NAME STREET ADDRESS 50 N. LAURA ST STE 2800 · STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32202 CITY-ST-ZIP went words to the second of th TITLE TITLE ' NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.

Deanna Voss, VP & Secretary; 1/12/05; (302) 479-4652

FILED Feb 02, 2005 8:00 am