## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000000570

Entity Name: BLACK DIAMOND MANAGEMENT SERVICES, INC.

Apr 11, 2012 Secretary of State

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

4210 WEST TAMPA BAY BOULEVARD 101 E KENNEDY BLVD TAMPA, FL 33614

SUITE 2100

TAMPA, FL 33602

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

4210 WEST TAMPA BAY BOULEVARD PO BOX 172117 TAMPA, FL 33614 TAMPA, FL 33672

FEI Number: 74-3113573 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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: CCFO

ROTHMAN, ROBERT Name:

101 E KENNEDY BLVD, SUITE 2100 Address:

City-St-Zip: TAMPA, FL 33602

Title: DVST

ATWOOD, SCOTT Name:

101 E KENNEDY BLVD, SUITE 2100 Address:

City-St-Zip: TAMPA, FL 33602

Title: SRVP

BEALE, CHARLES L Name:

101 E KENNEDY BLVD, SUITE 2100 Address:

City-St-Zip: TAMPA, FL 33602

Title:

BUCHANAN, KIM Name:

Address: 101 E KENNEDY BLVD, SUITE 2100

City-St-Zip: TAMPA, FL 33602

Title:

NOLAN, SHARON L Name:

Address: 101 E KENNEDY BLVD. SUITE 2100

City-St-Zip: TAMPA, FL 33602

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARON NOLAN AS 04/11/2012