

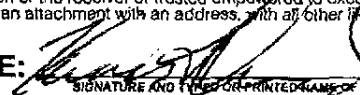


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # F12735 1. Entity Name KEN DIMOND AND ASSOCIATES, INC.		
Principal Place of Business 1506 CHESAPEAKE COURT MELBOURNE, FL 32940	Mailing Address 1506 CHESAPEAKE COURT MELBOURNE, FL 32940	
DO NOT WRITE IN THIS SPACE		
 02172006 No Chg-F CR2E034 (11/05)		
4. FEI Number 59-2046519		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent DIMOND, KENNETH R 1506 CHESAPEAKE CT MELBOURNE, FL 32940		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		000000442803 03/04/06-80034-018 150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS DIMOND, KENNETH R. 1506 CHESAPEAKE COURT MELBOURNE, FL 32940	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: 		KENNETH R. DIMOND 2/17/06 321-259-6331 <small>Date Daytime Phone #</small>