2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004678

Entity Name: DIAMOND HEALTH GROUP, INC.

FILED Jul 07, 2005 Secretary of State

Current Principal Place of Business: 700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 23219				New Principal Place of Business:		
Current Mailing Address:			New	New Mailing Address:		
700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 232180105						
FEI Number: 54-1309100 FEI Number Applied For () FEI Nu			FEI Number N	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION INFORMATION SERVICES, INC. 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						
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	CREWS, JOHN V	STREET, SUITE 900	Title: Name Addre City-\$		PRES (X) Change () Addition WHITE, GEORGE K 700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 23219	
Title: Name: Address: City-St-Zip:	HANCOCK, THOM	STREET, SUITE 900	Title: Name Addre City-\$: :	C (X) Change () Addition HANCOCK, THOMAS F III 4112 INNSLAKE DR. GLEN ALLEN,, VA 23060	
Title: Name: Address: City-St-Zip:	WHITE, GEORGE	STREET, SUITE 900	Title: Name Addre City-\$: :	SVP (X) Change () Addition JOHN, MCNAUGHT P 700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 23219	
Title: Name: Address: City-St-Zip:	WOODARD, RICI	STREET, SUITE 900	Title: Name Addre City-S		EVP (X) Change () Addition WOODARD, RICHARD V 700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 23219	
Title: Name: Address: City-St-Zip:	GARDNER, W. R	STREET, SUITE 900	Title: Name Addre City-S		()Change ()Addition	
Title: Name: Address: City-St-Zip:	DAJON, SHARON	STREET, SUITE 900	Title: Name Addre City-\$		SVP (X) Change () Addition DAJON, SHARON M 700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 23219	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: W. RUSSELL GARDNER CFO 07/07/2005