2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004678

Entity Name: DIAMOND HEALTH GROUP, INC.

FILED Mar 02, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 23219					
Current Mailing Address:			New Mailing Address:		
700 EAST MAIN STREET, SUITE 900 RICHMOND, VA 232180105					
FEI Number: 54-1309100		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 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	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WHITE, GEORGE	STREET, SUITE 900	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C () E HANCOCK, THOM 4112 INNSLAKE GLEN ALLEN,, VA	DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JOHN, MCNAUGH	STREET, SUITE 900	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WOODARD, RICH	STREET, SUITE 900	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GARDNER, W. R	STREET, SUITE 900	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DAJON, SHARON	STREET, SUITE 900	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 03/02/2006