

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G44962** (0)

1. Corporation Name
DIAMOND & DIAMOND, P.A.



Principal Place of Business

**2036 MCGREGOR BLVD
2036 MCGREGOR BLVD.
FORT MYERS FL 33901
US**

Mailing Address

**PO DRAWER 2590
2036 MCGREGOR BLVD.
FORT MYERS FL 33902
US**

3. Date Incorporated or Qualified **06/23/1983** 3a. Date of Last Report **03/10/1995**

4. FET Number **59-2299922** Applied For Not Applicable

5. Certificate of Status Debited ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

**DIAMOND, ANTHONY J.
2036 MCGREGOR BLVD.
FT. MYERS FL 33901**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.04(2) and 607.1509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.04(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	NAME	DIAMOND, ANTHONY J.	DELETED
STREET ADDRESS			2036 MCGREGOR BLVD.	
CITY-STATE-ZIP			FT. MYERS FL	
TITLE	D	NAME	DIAMOND, STELLA	DELETED
STREET ADDRESS			2036 MCGREGOR BLVD.	
CITY-STATE-ZIP			FT. MYERS FL	
TITLE		NAME		DELETED
STREET ADDRESS				
CITY-STATE-ZIP				
TITLE		NAME		DELETED
STREET ADDRESS				
CITY-STATE-ZIP				
TITLE		NAME		DELETED
STREET ADDRESS				
CITY-STATE-ZIP				

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change	Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE	Change	Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

14. I do hereby certify that the information supplied was true and correctly furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 a trustee, empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Stella Diamond
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/96 741-334-4401

CR2E034 (12/95)