## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address PO DRAWER 2590

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **G44962**

1. Corporation Name

Principal Place of Business

DIAMOND & DIAMOND, P.A.

2036 MCGREGOR BLVD 2036 MCGREGOR BLVD. FORT MYERS FL 33901 US		PO DRAWER 2590 2036 MCGREGOR BLVD. FORT MYERS FL 33902 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  06/23/1983			
2 Principal DI	ace of Business	2a. Mailing Address			4. FEI Number	T A	plied For	
2. FINICIPALE.	ace of dusiness	26			59-2299922	<u> </u>	ot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.	•				Additional equired	
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Country	'	8. This corporation owes the current year Intang	-		
24	25	29 30	<u> </u>		1 ordered 1 opening 1 min	Yes	ZNo	
<u>.</u>	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered Ag	ent		
	IOND, ANTHONY J. MCGREGOR BLVD.		82		ddress (P.O. Box Number is Not Acceptable)			
	MYERS FL 33901				T John a Tree day to the market start of	<u> </u>		
T1. P	" "	•	83		•			
			~ 84	,	FL		Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age	nt signature red	quired when reinstating) DATE			
12.	OFFICERS AND		13.	, , , , , , , , , , , , , , , , , , , ,	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO		
TITLE	PD	☐ DELETE	1.1 TITLE			] Change	☐ Addition	
NAME	DIAMOND, ANTHONY J.		1.2 NAME					
STREET ADDRESS	2036 MCGREGOR BLVD.		1.3 STREE	T ADDRESS				
City-ST-ZIP	FT. MYERS FL		1.4 CITY-5	T-ZIP				
TITLE	D	DELETE	2.1 TITLE			] Change	☐ Addition	
NAME	DIAMOND, STELLA		2.2 NAME	-			\$	
STREET ADDRESS	2036 MCGREGOR BLVD:	د، تعلید،ست ی دی	2.3 STREE	TADDRESS	ا در المر <u>ای باشد می از از از میسید مید</u> برسید با با در این از می			
C/TY-ST-ZIP	FT. MYERS FL		2.4 CITY+	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE	Ì	<u>L</u>	] Change	☐ Addition	
NAME			32 NAME					
STREET ADDRESS		•	3.3 STREE	TADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		7.0b -	TT A James	
TITLE		☐ DELETE	4.1 TITLE		· E	] Change	Addition	
NAME			4.2 NAME	1				
STREET ADDRESS	-		4.3 STREE	TADORESS	•			
CITY-ST-ZIP			4.4 CITY-5	T- ZIP		7 Change	□ Addition	
TITLE (		☐ DELETE	5.1 TITLE		. L	] Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			1	T ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CITY-5	11-ZIP		Change	Addition	
TITLE		☐ DELETE			L	_i change		
NAME			6.2 NAME					
STREET ADDRESS				TADDRESS			{	
CITY-ST-ZIP		ALC EIL J	6.4 CITY-5		in Carting 140 07/2\(\text{i}) Elopida Statutan Liurthar cartifo	that the	information	
indicated officer or	an this served reset of complemental t	annual report is true and accurat er or trustee,empowered to exe	te and tha cute this a	it my signa report as re	in Section 119.07(3)(i), Florida Statutes. I further certify ture shall have the same legal effect as if made under dequired by Chapter 607, Florida Statutes; and that my research.	าสเก เกลเ	ram an	

SIGNATURE:

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90110 013 \*\*\*150.00