


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 08:00 AM
Secretary of State

DOCUMENT # G48447		
1. Entity Name DIZNEY DOUBLE DIAMOND, INC.		
Principal Place of Business 603 MAIN STREET P.O. BOX 1100 WINDERMERE, FL 34786-1100 US	Mailing Address P. O. BOX 1100 WINDERMERE, FL 34786-1100 US	



02042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2307573	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 BARKMAN, KEVIN 603 MAIN STREET WINDERMERE, FL 34786
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**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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

U000000899561

04/28/08-80044-005 150.00

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCST DIZNEY, DONALD R. 603 MAIN STREET WINDERMERE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DIZNEY, DAVID A 603 MAIN STREET WINDERMERE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BRAND, DEIRDRE D 603 MAIN STREET WINDERMERE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V DIZNEY, IRENE M. 603 MAIN STREET WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BRAND, ROGER 603 MAIN STREET WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Kevin Barkman Executive Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/08 (407) 876-2200
Date Daytime Phone #