

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

**APPROVED
AND
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95 MAY -1 AM 8:06

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # H29486 (8)

1. Corporation Name
DIAMOND HOMES, INC.

Principal Place of Business
9311 SPRINGHILL DRIVE
SPRINGHILL FL 34608-6354
US

Mailing Address
9311 SPRINGHILL DRIVE
SPRINGHILL FL 34608-6354
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/07/1984

3a. Date of Last Report
03/22/1994

4. FEI Number
59-2461287

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

6. This Corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ **Yes** ☐ **No**

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. # etc.

26. Suite, Apt. #, etc.

23. City & State

28. City & State

24. Zip **25. Country**

29. Zip **30. Country**

9. Name and Address of Current Registered Agent

CECIL, MIKE A.
9311 SPRINGHILL DRIVE
SPRINGHILL FL 34608

10. Name and Address of New Registered Agent

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 607.0302 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 607.0305, Florida Statutes.

SIGNATURE

Signature of Agent or person authorized to appoint agent and file this statement

(Not for Registered Agent signature required when filing statement)

(Not for)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE	ST
12.2 NAME	CECIL, MARY
12.3 STREET ADDRESS	13028-2 COUNTY LINE RD.
12.4 CITY, ST, ZIP	HUDSON FL
12.5 TITLE	P
12.6 NAME	CECIL, MIKE A.
12.7 STREET ADDRESS	13028-2 COUNTY LINE RD.
12.8 CITY, ST, ZIP	HUDSON FL
12.9 TITLE	AVP
12.10 NAME	AUSTAD, DIANA T.
12.11 STREET ADDRESS	13028-2 COUNTY LINE RD.
12.12 CITY, ST, ZIP	HUDSON FL
12.13 TITLE	VP
12.14 NAME	CECIL, TERRY K.
12.15 STREET ADDRESS	13028-2 COUNTY LINE RD.
12.16 CITY, ST, ZIP	HUDSON FL
12.17 TITLE	F
12.18 NAME	FERRIS, DOROTHY J.
12.19 STREET ADDRESS	13028-2 COUNTY LINE RD.
12.20 CITY, ST, ZIP	HUDSON FL
12.21 TITLE	
12.22 NAME	
12.23 STREET ADDRESS	
12.24 CITY, ST, ZIP	

13.1 TITLE	☐ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST, ZIP	
13.5 TITLE	☐ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST, ZIP	
13.9 TITLE	☒ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST, ZIP	
13.13 TITLE	☐ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST, ZIP	
13.17 TITLE	☐ Change ☐ Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicates for 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 the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, and is accompanied with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X

4-28-95

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