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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

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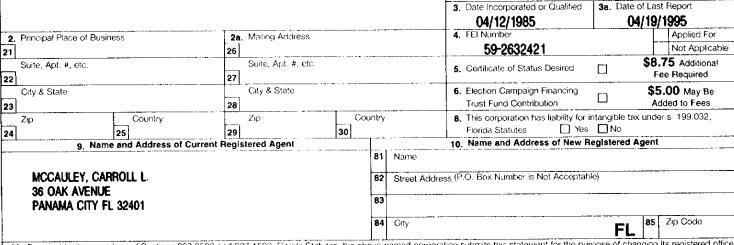
DIAMOND NINE, INC.

Principa!	Place of	Business

Mailing Address

7531 COLERIDGE RD. PANAMA CITY FL 32404

7531 COLERIDGE RD. PANAMA CITY FL 32404



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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE					
	Styllature, typer or printed name of registered algorithand the		Registerial Agent signature required when renestating DATE		
12.	OFFICERS AND DIR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DEFELE	: 1 TITLE	Change Addition	
NAME	GOODWIN, DAVID W.		1.2 NAME		
STREET ADDRESS	7531 COLERIDGE RD.		1.3 STREET ADDRESS		
CITY - ST - ZIP	PANAMA CITY FL		1.4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	2.1 THE	☐ Change ☐ Addition	
NAME	ZIPPERLEIN, ROBERT C.		2 2 NAMÉ		
STREET ADDRESS	7122 E. 10TH ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL		2.4 C(TY+S1+Z)P		
TITLE	VD	DELFTE	3 + TITLE	Change Addition	
NAME	SMITH, TIM M.		3.2 NAME		
STREET ADDRÉSS	3333 W 14TH STREET		3.3 STREET ADDRESS		
CITY - ST - ZIP	PANAMA CITY FL		3 4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	4 1 TITLE	Change Addition	
NAME	GUTHRIE, ALLEN, III		4.2 NAME		
STREET ADDRESS	WEWA ROUTE, BOX 378		4.3 STREET ADDRESS		
CITY - ST - Z:P	PANAMA CITY FL		4 4 C+TY - ST - ZIP		
TITLE	DST	☐ DELETE	5 111116	☐ Change ☐ Addition	
NAME	CARTER, GERALD L.		5.2 NAME		
STREET ADORESS	4002 E. 12TH CT.		5.3 STREET ADORESS		
CITY - ST - ZIP	PANAMA CITY FL		5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6 1 TOLE	Change Addition	
NAME	·		6.2 NAME		
STREET ADDRESS			6 3 STHEET ADDRESS		
CITY ST. 7IP			6.4 CITY - ST - ZIP		

14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 the receiver or trustee enipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, open an attachment with an address.

SIGNATURE: X

DAVID W. GODDWIN. PRESIDENT 4/15/96

CR2E034 (12/95)