

FILED

May 15 1997 8:00am
Secretary of State


 PROFIT CORPORATION ANNUAL REPORT 1997
 FLORIDA DEPARTMENT OF STATE
 Sandra S. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **H51996** (7)

1. Corporation Name
DIAMOND NINE, INC.

Principal Place of Business

7531 COLERIDGE RD.
PANAMA CITY FL 32404

Mailing Address

7531 COLERIDGE RD.
PANAMA CITY FL 32404-8805

				3. Date Incorporated or Qualified 04/12/1985		3a. Date of Last Report 04/17/1996	
2. Principal Place of Business			2a. Mailing Address			4. FEI Number 59-2632421	
21 Suite, Apt. #, etc.			26 Suite, Apt. #, etc.			Applied For Not Applicable	
22 City & State			27 City & State			5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip Country			28 Zip Country			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 25			29 30			6. This corporation has liability for intangible tax under s. 199 032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

MCCAULEY, CARROLL L.
 38 OAK AVENUE
 PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

81	Name
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82	Street Address (P.O. Box Number is Not Acceptable)
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63

84	City
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FL

85	Zip Code
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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: *Harold M. Hudson*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

~~X~~ QAT

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZIPPERLEIN, ROBERT C.	2.2 NAME	
STREET ADDRESS	7122 E. 10TH ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY FL	2.4 CITY - ST - ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, TIM M.	3.2 NAME	
STREET ADDRESS	3333 W 14TH STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY FL	3.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUTHRIE, ALLEN, III	4.2 NAME	
STREET ADDRESS	WEWA ROUTE, BOX 378	4.3 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY FL	4.4 CITY - ST - ZIP	
TITLE	DST <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTER, GERALD L.	5.2 NAME	
STREET ADDRESS	4002 E. 12TH CT.	5.3 STREET ADDRESS	
CITY - ST - ZIP	PANAMA CITY FL	5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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:

DAVID W. GOODWIN

[Signature] 5/29/77

Date _____

872-311

Design Phone # _____

0042196

CR2E034 (9/96)