2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/3/

FILED
Jun 07, 2004 8:00 am
Secretary of State
05-03-2004 90133 044 ****50.00

DOCUMENT # L03000039422

1. Entity Name
DIAMOND LAKE INVESTORS LLC

Principal Place of Business	Mailing Address
C/O GARY SMIGIEL, LC-ATTN: GARY SMIGIEL 7965 LANTANA RD. LAKE WORTH, FL 33467	C/O GARY SMIGIEL, LC-ATTN: GARY SMIGIEL 7965 LANTANA RD. LAKE WORTH, FL 33467

02102004 Chg-LLC CR2E033 (10/03)

2. Principal Place of Business	3. Mailing Address
7965 Lantana Rd	P.O. Box 540623
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Lake Worth FL	Lake Worth FL
City & State: 33467 USA	City & State: 33454
Zip / Country	Zip: 33454 Country: US

4. FEI Number (65-1706XX) ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ARMOUR, ALAN I.II 1645 PALM BEACH LAKES BLVD., STE. 1200 WEST PALM BEACH, FL 33401	Name: STEPHONIE WINSTON Street Address (P.O. Box Number is Not Acceptable): 624 Southwind Circle #1 City: N. Palm Beach FL Zip Code: 33408

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's signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member Gary Smigiel P.O. Box 540623, Lake Worth FL 33454 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Managing Member C. H. Consulting, Inc. 6534 Rock Creek Drive Lake Worth, FL 33467 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ MANAGING MEMBER 5/28/04 5615483405
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #