2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Mar 28, 2008 08:00 Al **Secretary of State** DOCUMENT # L04000060908 1. Entity Name DIAMOND OF NAVARRE, LLC Principal Place of Business Mailing Address 20725 SW 46TH AVENUE 20725 SW 46TH AVENUE NEWBERRY, FL 32669 US NEWBERRY, FL 32669 01212008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS Applied For 4. FEI Number 61-1476786 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STOCKMAN, JAMES J 20725 SW 46TH AVENUE NEWBERRY, FL 32669 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 Fiorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE DAVIS HERITAGE - NAVARRE, LLC NAME STREET ADDRESS 20725 SW 46TH AVENUE CITY-ST-ZIP NEWBERRY, FL 32669 TITLE NAME STREET ADDRESS CITY-SI-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TOTLE

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 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: Stefan M. Davis SIGNATURE AND TYPED OF RINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

<u>January 31, 2008</u>

(352) 472-7773

FILED

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