

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028029

Entity Name: DIAMOND SANDS, LLC

FILED
May 30, 2007
Secretary of State

Current Principal Place of Business:

4 CAHABA COURT
DESTIN, FL 32541

New Principal Place of Business:

4935 E CO HWY 30-A
SUITE 3
SANTA ROSA BEACH, FL 32549

Current Mailing Address:

P.O. BOX 1297
DESTIN, FL 32541

New Mailing Address:

P O BOX 611449
ROSEMARY BEACH, FL 32461

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WORK, R. SCOTT
4174 WHITETAIL CIRCLE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

CONGLETON, BRAD
50 UPTOWN GRAYTON CIRCLE
SANTA ROSA BEACH, FL 32459 US

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.

SIGNATURE: BRAD CONGLETON

05/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MORRIS, LARRY
Address: P.O. BOX 1297
City-St-Zip: DESTIN, FL 32540

Title: MGRM () Delete
Name: JINKS, MARILYN B
Address: P.O. BOX 611449
City-St-Zip: ROSE MARY BEACH, FL 32461

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MARILYN JINKS

MGRM

05/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date