

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 09, 2007 8:00 am**  
**Secretary of State**

05-09-2007 90029 005 \*\*\*150.00

60050196



|  |  |   |   |  |  |
|--|--|---|---|--|--|
| <b>DOCUMENT # L06000058758</b><br>1...Entity Name —<br><b>DIAMOND CROWN STABLES, LLC</b>   |  |   |   |  |  |
| Principal Place of Business<br><b>6466 NORTHWEST 5TH WAY</b><br><b>FT. LAUDERDALE, FL 33309 US</b>   |  |   | Mailing Address<br><b>6466 NORTHWEST 5TH WAY</b><br><b>FT. LAUDERDALE, FL 33309 US</b>  |  |  |
| 2. Principal Place of Business - No P.O. Box #<br><b>2953 W. CYPRESS CANYON RD</b><br>Suite, Apt. #, etc.<br><b>101</b>  |  | 3. Mailing Address<br><b>2953 W. CYPRESS CANYON RD</b><br>Suite, Apt. #, etc.<br><b>101</b> |   |  |  |
| City & State<br><b>FT. LAUDERDALE, FL</b><br>Zip<br><b>33309</b>   |  | Country<br><b>USA</b>   |   | City & State<br><b>FT. LAUDERDALE, FL</b><br>Zip<br><b>33309</b> |  |
| Country<br><b>USA</b>  |  | 4. FEI Number<br><b>APPLIED FOR</b>   |   |  |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>  |  |   |   | Applied For<br><input type="checkbox"/> Not Applicable           |  |
| 6. Name and Address of Current Registered Agent<br><br><b>TIRICO, DARYL</b><br><b>6466 NORTHWEST 5TH WAY</b><br><b>FT. LAUDERDALE, FL 33309</b>  |  |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><b>2953 W. CYPRESS CANYON RD -STE-101</b><br>City<br><b>FT. LAUDERDALE</b> |  |  |
| State<br><b>FL</b>   |  |   | Zip Code<br><b>33309</b>  |  |  |
| 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 <span style="float: right;">4/27/07</span><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>   |  |   |   |  |  |
| <b>Filing Fee is \$50.00</b><br><b>Due by May 1, 2007</b>  |  | <b>Make check payable to</b><br><b>Florida Department of State</b>                          |   |  |  |
| 9. MANAGING MEMBERS/MANAGERS   |  |   | 10. ADDITIONS/CHANGES   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | MGR<br>CHAPEL TRAIL STABLES, LLC<br>6466 NORTHWEST 5TH WAY<br>FT. LAUDERDALE, FL 33309 | <input type="checkbox"/> Delete   |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | 2953 W. CYPRESS CANYON RD STE-101<br>FT. LAUDERDALE, FL 33309                          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                           |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                           |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                           |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition                           |   |  |  |
| 11. 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: <span style="float: right;">4/27/07</span><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>  |  |   |   |  |  |