

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000068531

FILED
Feb 20, 2009
Secretary of State

Entity Name: DIAMOND WRECKERS LLC

Current Principal Place of Business:

1881 PICKETTVILLE ROAD
JACKSONVILLE, FL 32220

New Principal Place of Business:

Current Mailing Address:

2300 SO. DIVISION AVE.
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 83-0487047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, WILLIAM T
2300 SO. DIVISION AVE.
ORLANDO, FL 32805 US

Name and Address of New Registered Agent:

WILSON, WILLIAM T MGRM
2300 SO. DIVISION AVE.
ORLANDO, FL 32805 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: WILLIAM T. WILSON

02/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MAGNUS, ROBERT
Address: 2300 SO. DIVISION AVE.
City-St-Zip: ORLANDO, FL 32805

Title: MGRM () Delete
Name: WILSON, WILLIAM T
Address: 2300 SO. DIVISION AVE
City-St-Zip: ORLANDO, FL 32805

Title: MGR () Delete
Name: MAUDLIN, MICHAEL
Address: 2300 SO. DIVISION AVE.
City-St-Zip: ORLANDO, FL 32805

Title: MGR () Delete
Name: MAUDLIN, JOSH
Address: 2300 SO. DIVISION AVE.
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MAGNUS, ROBERT MGRM
Address: 2300 SO. DIVISION AVE.
City-St-Zip: ORLANDO, FL 32805

Title: MGRM (X) Change () Addition
Name: WILSON, WILLIAM T MGRM
Address: 2300 SO. DIVISION AVE
City-St-Zip: ORLANDO, FL 32805

Title: MGR (X) Change () Addition
Name: MAUDLIN, MICHAEL MGR
Address: 2300 SO. DIVISION AVE.
City-St-Zip: ORLANDO, FL 32805

Title: MGR (X) Change () Addition
Name: MAUDLIN, JOSH MGR
Address: 2300 SO. DIVISION AVE.
City-St-Zip: ORLANDO, FL 32805

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: WILLIAM T. WILSON

MGRM

02/20/2009

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