FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 24 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-05/30/95--01014--012
****450.00 ****225.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # M34475 (7)

1. Corporation Name
DIAMOND C HOLDINGS, INC.

Principal Place of Business	Mailing Address
% PATRICIA GONDA 1920 PALM BEACH LAKES BLVD., STE. 202 WEST PALM BEACH FL 33409	% PATRICIA GONDA 1920 PALM BEACH LAKES BLVD., STE. 202 WEST PALM BEACH FL 33409

3. Date Incorporated or Qualified: 06/30/1986
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2782146 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

WALDRON, THOMAS S.
1920 PALM BEACH LAKES BLVD.
SUITE 202
WEST PALM BEACH FL 33409

10. Name and Address of New Registered Agent

81 Name: N. Griffin Wilson
82 Street Address (P.O. Box Number is Not Acceptable): 1920 Palm Beach Lakes Blvd., Suite 202
83
84 City: West Palm Beach FL 85 Zip Code: 33409

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] 5-23-95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	D/P ☒ Change ☐ Addition
NAME	WALDRON, THOMAS S.	1.2 NAME	N. Griffin Wilson
STREET ADDRESS	1920 PALM BCH LAKES BLVD	1.3 STREET ADDRESS	1920 Palm Beach Lakes Blvd., Suite 202
CITY ST ZIP	WEST PALM BCH FL	1.4 CITY ST ZIP	West Palm Beach, FL 33409
TITLE	ST	2.1 TITLE	S/T ☒ Change ☐ Addition
NAME	WALDRON, THOMAS	2.2 NAME	N. Griffin Wilson
STREET ADDRESS	1920 PALM BCH LAKES BLVD	2.3 STREET ADDRESS	1920 Palm Beach Lakes Blvd., Suite 202
CITY ST ZIP	WEST PALM BCH FL	2.4 CITY ST ZIP	West Palm Beach, FL 33409
TITLE	V	3.1 TITLE	☒ Change ☐ Addition
NAME	WILSON, N. G	3.2 NAME	NONE
STREET ADDRESS	1920 PALM BCH LAKES BLVD #202	3.3 STREET ADDRESS	
CITY ST ZIP	W PALM BCH FL	3.4 CITY ST ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	655 ☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	5/24/95
CITY ST ZIP		6.4 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: N. Griffin Wilson, President 5/23/95 407-689-4488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0240143 CP