

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004343

FILED  
Feb 27, 2009  
Secretary of State

Entity Name: DIAMOND PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6150 DIAMOND CENTRE CT  
#1001  
FORT MYERS, FL 33912

**New Principal Place of Business:**

18011 S. TAMiami TRAIL  
#16 PMB 114  
FORT MYERS, FL 33908

**Current Mailing Address:**

14241 METROPOLIS AVE.  
100  
FORT MYERS, FL 33912

**New Mailing Address:**

18011 S. TAMiami TRAIL  
#16 PMB 114  
FORT MYERS, FL 33908

FEI Number: 74-2963876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BEKER & POLIAKOFF  
14241 METROPOLIS AVE.  
SUITE 100  
FORT MYERS, FL 33912 US

**Name and Address of New Registered Agent:**

MCDONALD, WALTER K P  
6150 DIAMOND CETER COURT  
SUITE 1001  
FORT MYERS, FL 33912 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: WALTER K MCDONALD

02/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCDONALD, WALTER K  
Address: 6150 DIAMOND CENTRE CT. SUITE 101  
City-St-Zip: FORT MYERS, FL 33912

Title: V ( ) Delete  
Name: MCCORMACK, RICARDO J  
Address: 6150 DIAMOND CENTRE CT. SUITE 500  
City-St-Zip: FORT MYERS, FL 33912

Title: ST ( ) Delete  
Name: WOODWARD, JOHN  
Address: 6150 DIAMOND CENTER CT. #400  
City-St-Zip: FORT MYERS, FL 33912

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MCDONALD, WALTER K  
Address: 6150 DIAMOND CENTRE CT. SUITE 1001  
City-St-Zip: FORT MYERS, FL 33912

Title: V (X) Change ( ) Addition  
Name: O'DONNELL, JACKIE  
Address: 5728 FLAMINGO DRIVE  
City-St-Zip: CAPE CORAL, FL 33904

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RYAN W. LEFFLLER

MGR.

02/27/2009

Electronic Signature of Signing Officer or Director

Date