2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004579

FILED Sep 02, 2009 Secretary of State

Entity Nar	me: DIAMONDS IN THE ROUGH FARM, IN	C.
Current P	rincipal Place of Business:	New Principal Place of Business:
	S LANDING STINE, FL 32092	4411 RUES LANDING ST AUGUSTINE, FL 32092
Current M	ailing Address:	New Mailing Address:
4411 RVES LANDING ST AUGUSTINE, FL 32092		4411 RUES LANDING ST AUGUSTINE, FL 32092
In accordance	: 20-1041384 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did no Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired (X) ot receive the prior notice. Name and Address of New Registered Agent:
MATTE, MARIE 4411 RVES LANDING ST AUGUSTINE, FL 32092 US		MATTE, MARIE 4411 RUES LANDING ST AUGUSTINE, FL 32092 US
The above in the State	named entity submits this statement for the $\mbox{\sc p}$ e of Florida.	ourpose of changing its registered office or registered agent, or both,
SIGNATURE:		09/02/2009
	Electronic Signature of Registered Age	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	P () Delete MATTE, MARIE 8000 CR 208 ST AUGUSTINE, FL 32092 D () Delete GRUBBS, DEREK 343 CASUARINA CIRCLE ST. AUGUSTINE, FL 32224	Title: P (X) Change () Addition Name: MATTE, MARIE Address: 4411 RUES LANDING ROAD City-St-Zip: ST AUGUSTINE, FL 32092 Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete MATTE, REBECCA 14671 BONAIRE BLVD APT 201 DELRAY BEACH, FL 33446	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zin:	D () Delete TOP, ELIZABETH 3601 KERNAN BLVD. S, # 533 JACKSONVILLE FL 32224	Title: D (X) Change () Addition Name: JENRETTE, MARDEE Address: 700 MERRIWOOD LANE City-St-Zin: ST ALIGHSTINE EL 32092

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: MARIE MATTE Ρ 09/02/2009