

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2007 8:00 am**  
**Secretary of State**

04-13-2007 90163 032 \*\*\*\*61.25

<b>DOCUMENT # N06000007878</b>					
<b>1. Entity Name</b> SAVE BLACK DIAMOND, INC.					
<b>Principal Place of Business</b> 3740 W. BLACK DIAMOND CIRCLE LECANTO, FL 34461			<b>Mailing Address</b> 3740 W. BLACK DIAMOND CIRCLE LECANTO, FL 34461		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b> P.O. Box 640221			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03282007    Chg-NP    CR2E037 (12/06)	
<b>City &amp; State</b>		<b>City &amp; State</b> BEVERLY HILLS, FL		<b>4. FEI Number</b> 72-1618711	
<b>Zip</b>		<b>Country</b> 34464    CITRUS		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  LYN, DENISE A 307 N. APOPKA AVE INVERNESS, FL 34450			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
<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.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREGORY, JOSEPH D <input type="checkbox"/> Delete 3740 W. BLACK DIAMOND CIRCLE LECANTO, FL 34461		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE ATTACHED <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete CIPOLLA, JOEL W 3421 N. HAMMOCK DUNES VILLAGE PT LECANTO, FL 34461		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete WHITE, MICHAEL 3575 N. GRAYHAWK LOOP LECANTO, FL 34461		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>12. 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 or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> MICHAEL K. WHITE			4-11-2007    (352) 746-1324		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date    Daytime Phone #		

ATTACHMENT  
40059343

Save Black Diamond, Inc.  
P. O. Box 640221  
Beverly Hills, FL 34464  
Employer Identification Number 72 161 8711

**Additions/Changes to Officers and Directors**

Block 11 of Document # N06000007878

Title	P/D
Name	Joseph Gregory
Street Address	3740 W. Black Diamond Circle
City-St-Zip	Lecanto, FL 34461

Title	S/T/D
Name	Michael White
Street Address	3575 N Grayhawk Loop
City-St-Zip	Lecanto, FL 34461

Title	D
Name	John Axel
Street Address	3088 W. Bermuda Dunes Drive
City-St-Zip	Lecanto, FL 34461

Title	D
Name	Pat Bentley
Street Address	3360 West Pebble Beach Court
City-St-Zip	Lecanto, FL 34461