2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005
Secretary of State

DOCUMENT# N19649

Entity Name: BLACK DIAMOND CLUB, INC.

Current Principal Place of Business:

2600 W BLACK DIAMOND CIR
LECANTO, FL 34461 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10000
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

P.O. BOX 10,000
CRYSTAL RIVER, FL 34423 US

FEI Number: 59-2789517 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STILLWELL, CLARK A
BANK OF INVERNESS BUILDING
320 HIGHWAY 41 SOUTH
INVERNESS, FL 34450 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: OLSEN, STANLEY C
Address: 2600 W BLACK DIAMOND CIR
City-St-Zip: LECANTO, FL 34461

Title: DV ( ) Delete
Name: OLSEN, ELIZABETH M
Address: 2600 W BLACK DIAMOND CIRCLE
City-St-Zip: LECANTO, FL 34461

Title: ST ( ) Delete
Name: TAYLOR, MARINA C
Address: 2600 W. BLACK DIAMOND CIR.
City-St-Zip: LECANTO, FL 34461

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: HENDEE, BRETT
Address: 1700 SOUTH MACDILL AVENUE, SUITE 200
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARINA C. TAYLOR ST 02/14/2005

Electronic Signature of Signing Officer or Director — Date