

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20548

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** GLADES DIAMOND, INC.

**Current Principal Place of Business:**

601 COVENANT DR.  
BELLE GLADE, FL 334305728 US

**New Principal Place of Business:**

**Current Mailing Address:**

601 COVENANT DR.  
BELLE GLADE, FL 334305728 US

**New Mailing Address:**

**FEI Number:** 59-2810382

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MORRIS, ROBERT ESQ  
685 ROYAL PALM BCH BLVD STE 205  
ROYAL PALM BCH, FL 33411 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:** PD  
**Name:** MCCLENDON, EDNA  
**Address:** 140 SANTA MONICA AVENUE  
**City-St-Zip:** ROYAL PALM BEACH, FL 33411

**Title:** VPD  
**Name:** LOCKETT, PAULINE  
**Address:** 700 S.W. 8TH STREET  
**City-St-Zip:** BELLE GLADE, FL

**Title:** VTD  
**Name:** HARRISON, NORMAN  
**Address:** 340 NOAH CT  
**City-St-Zip:** BELLE GLADE, FL 33430

**Title:** TD  
**Name:** JACKSON, LAURA  
**Address:** 440 WEST 30TH STREET  
**City-St-Zip:** RIVIERA BEACH, FL 33404

**Title:** D  
**Name:** SMITH, NANCY  
**Address:** 1740 SOUTHEAST AVENUE K  
**City-St-Zip:** BELLE GLADE, FL

**Title:** 2 VP  
**Name:** ROBERTS II, THOMAS A  
**Address:** 140 PARK ROAD, NORTH  
**City-St-Zip:** ROYAL PALM BEACH, FL 33411

I hereby 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 all other like empowered.

**SIGNATURE:** THOMAS A. ROBERTS, II

DIR

03/31/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date