2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007 8:00 am
Secretary of State
03-21-2007 90034 043 ****61.25

DOCUMENT # N33755

1. Entity Name
DIAMOND RIDGE MASTER PROPERTY OWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6700 WINKLER ROAD, SUITE 2 FORT MYERS, FL 33919	C/O ALLIANT PROPERTY MANAGEMENT, LLC 6700 WINKLER ROAD, SUITE 2 FORT MYERS, FL 33919

02232007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
6719 Winkler Road	6719 Winkler Road
Suite, Apt. #, etc.: Suite 200	Suite, Apt. #, etc.: Suite 200
City & State: Fort Myers, Florida	City & State: Fort Myers, Florida
Zip: 33919 Country: USA	Zip: 33919 Country: USA

4. FEI Number: 59-3437752 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ALLIANT PROPERTY MANAGEMENT, LLC 6700 WINKLER ROAD, SUITE 2 FORT MYERS, FL 33919	Name Street Address (P.O. Box Number is Not Acceptable): 6719 Winkler Road Suite 200 City: Fort Myers **FL** Zip Code: 33919

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.

SIGNATURE: [signature] VP, Agent 3-16-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MINER, BARRY 28611 CARRIAGE HOMES DRIVE BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD FAULKNER, CATHY H 28477 HIDDEN LAKE DRIVE BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ARABIE, JACOB 286 TRAILS EDGE BLVD. BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BARDUASKIS, DAN 28851 BERMUDA LAGO COURT, #105 BONITA SPRINGS, FL 34134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CROWLEY, PAUL 28750 DIAMOND DRIVE, #105 BONITA SPRINGS, FL 34134	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jerry Page 28710 Diamond Dr. # 202 Bonita Springs, Fl. 34134 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARIN, AVI 800 HARBOUR DRIVE, SUITE 3 NAPLES, FL 34103	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. Bill Crain 10764 Regent Cr. Naples, Fl. 34109 ☐ Change ☒ Addition

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.

SIGNATURE: [signature] President 3/19/07 (239) 498-9451
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
(413) [illegible]