

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000209

FILED
Apr 29, 2008
Secretary of State

Entity Name: DIAMOND CREST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11902 RACE TRACK ROAD
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

11902 RACE TRACK ROAD
TAMPA, FL 33626 US

New Mailing Address:

FEI Number: 59-3275386

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PROPERTY GROUP OF CENTRAL FLORIDA, INC
11902 RACE TRACK ROAD
TAMPA, FL 33626 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: DVP () Delete
Name: FRAZER, DIANE
Address: 1984 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

Title: DP () Delete
Name: JAJUGA, GENE
Address: 1996 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: CAYO, DON
Address: 1966 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

Title: DST () Delete
Name: SANDERS, JESSYCA
Address: 2070 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: MEADOWS, NAVARRE
Address: 1961 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

Title: D (X) Delete
Name: NORTON, RON
Address: 2028 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

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: DS (X) Change () Addition
Name: SIKORSKI, JOY
Address: 1937 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

Title: DT (X) Change () Addition
Name: NORTON, RON
Address: 2023 DIAMOND CT
City-St-Zip: OLDSMAR, FL 34677

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

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: GENE JAJUGA

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date