


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 28 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Bandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000004098 (9)**

1. Corporation Name

**DIAMOND PARK PROPERTY OWNERS' ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

**1800 CLUBHOUSE DRIVE  
SUN CITY CENTER FL 33570**

**FLM  
1804 CLUBHOUSE DR.  
SUN CITY CENTER FL 33573**

3. Date Incorporated or Qualified

**08/22/1994**

4. FEI Number

**59-3294497**

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** *Diamond Park Property Owners Assoc. Inc.*

**22** City & State

**27** *P.O. Box 510102*

**23** Zip

Country

**28** *Punta Gorda FL*

**29** *33951*

Country

**30** *LEE*

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GREENE, ROBERT E  
FLORIDA LIFESTYLE MANAGEMENT  
1804 CLUBHOUSE DRIVE  
SUN CITY CENTER FL 33573**

**81** Name

*Debra H. Meredith*

**82** Street Address (P.O. Box number is Not Acceptable)

*Star Hospitality Management*

**83**

*3160 Matecumbe Key Rd.*

**84** City

*Punta Gorda*

**FL**

**85** Zip Code

*33955*

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

*Debra H. Meredith*

**3-26-98**

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

**12.**  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**PD**  
**REILLY, GERALD M**  
**3301 DIAMOND KEY COURT**  
**PUNTA GORDA FL**

☐ DELETE

**13.**  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**VD**  
**WIEGAND, PATRICIA**  
**3381 DIAMOND KEY COURT**  
**PUNTA GORDA FL**

☐ DELETE

**14.**  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**STD**  
**SMITH, H. R**  
**3351 DIAMOND KEY COURT**  
**PUNTA GORDA FL**

☐ DELETE

**15.**  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**16.**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

☐ DELETE

**17.**  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**18.**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

☐ DELETE

**19.**  
TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**20.**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1** TITLE  
**1.2** NAME  
**1.3** STREET ADDRESS  
**1.4** CITY - ST - ZIP

**JOANN Walker**  
**3331 Diamond Key Ct.**  
**Punta Gorda, FL**

☐ Change ☒ Addition

**2.1** TITLE  
**2.2** NAME  
**2.3** STREET ADDRESS  
**2.4** CITY - ST - ZIP

**Change** ☐ Addition ☐

**3.1** TITLE  
**3.2** NAME  
**3.3** STREET ADDRESS  
**3.4** CITY - ST - ZIP

**SD**  
**SMITH, DICK**  
**3351 Diamond Key Court**  
**Punta Gorda FL**

☒ Change ☐ Addition

**4.1** TITLE  
**4.2** NAME  
**4.3** STREET ADDRESS  
**4.4** CITY - ST - ZIP

**Change** ☐ Addition ☐

**5.1** TITLE  
**5.2** NAME  
**5.3** STREET ADDRESS  
**5.4** CITY - ST - ZIP

**Change** ☐ Addition ☐

**6.1** TITLE  
**6.2** NAME  
**6.3** STREET ADDRESS  
**6.4** CITY - ST - ZIP

**Change** ☐ Addition ☐

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Debra H. Meredith*

**4-2-98 941505-2408**

CP2E037 (10/97)