

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # N94000004995

1. Entity Name  
AVON PARK DIAMOND CLUB, INC.



Principal Place of Business  
210 US 27 NORTH  
AVON PARK, FL 33825

Mailing Address  
P O BOX 351  
AVON PARK, FL 33826 US



02062007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0524634

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

SEVIGNY, RONALD  
515 KELLY ROBERTS RD  
ZOLFO SPRINGS, FL 33890

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IN THIS SPACE**

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 of person or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEVLIN, TIM 321 TULANE CIR AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WRIGHT, RANDY 910 LANE LOTELR DR AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TDSD BROJEK, CHET 3310 PAR RD SEBRING, FL 33870
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BD SEVIGNY, RONALD 515 KELLY ROBERTS RD ZOLFO SPRINGS, FL 33890
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BD DUKE, MAY 1010 W MAIN ST AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000632491  
02/21/07-80024-016 61.25

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IN THIS SPACE**

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: RONALD O. SEVIGNY  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/07  
Date

863-414-3850  
Daytime Phone #