	•	PLEASE READ A	TPM LIZ	ייי . פוורדור	NIS.	REFORE (OMPLET	ING THIS EO		50.09	
R	_ ^ _	ION MENT	FLORIDA		Mor	NT OF STATE tham tate		APPROYED ALEO		BU	
DOCUMENT # N9700000591							98 NO	STIME 61 AC	13		
1. Corporation Name							_SECRETARY_OF STATE				
DIAMOND LAKE CONDOMINIUM ASSOCIATION A, INC.							TALLA	HASSÉE, FLORIC)A		
Principal Place of Business Mailing Address							11000000			- 1 Mai (10 1 Mai (10 1 Mai -	
1455 PIPER BLVD 1455 PIPER BL NAPLES FL 33943 NAPLES FL 33					,						
		incorrect in any way, line thro									
•				ling Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 02/03/1997				
			Suite, Apt. #, etc.			,	5. FEI Number	769543	02/00/	Applied For	
City & State			City & State			·	6.	67070	to 75 . i.	Not Applicable	
Zip 		Country	Zip		Country	′ 	CERTIFICATE	E OF STATUS DESIRED [J for a C	ditional Fee required ertificate of Status	
7. Names a	and Street Ad	dresses of Each Officer and/o	or Director (Flor		Stre	et Address of Each	ì.				
Title(s)	s) and/or Directors 3 (Do NOT				Off OT Use	icer and/or Director Post Office Box N	and/or Director City / State / Zip st Office Box Numbers) 4			űp ———————	
PD	DRORI, ASSAF JACOB NAJAR 1455 PIPER BLV				R BLVI)	NAPLES FL 33943				
JANO NEKINETT				1455 PIPER BLVD				NAPLES FL 33943			
STD ROLLAS, MARCO HORRY MARTIN				1455 PIPER BLVD			·	NAPLES FL 33943			
										•	
						-	40	000027064449 -12/08/9801073009			
						-			23 **	***61.25	
Name and Address of Current Registered Agent Name							9. Name and A	Address of New Regis	tered Agent		
DRAKE JENNIJEED RALES						OOB A	UNJAR				
3111 STIRLING ROAD 1453						PIPETO	Blud				
FORT LAUDERDALE FL 33312 Suite, Apt. #, Etc.							·				
CHYNAPL							ϵ s		State Zip	code 33943_	
	appointed the	e registered agent of the above	e named corpo	ration, am fan		th and accept the o	bligations of Secti	on 607.0505, F.S.			
Signature o Registered	Agent	REI	GISTÉRED AG	ENT MUST S		IRED	 '	Date		- M	
11. Th	is corpo angible	ration owes or ha Personal Property	s paid th	e curren June 30	t yea	er Yes 🏻		(See of	her stre id in interior	ntormation tax.)	
this rein	statement app	officer or director or the receivablication, the reason for dissolon have been paid and the n	ution has been	eliminated, the	е согра	rate name satisfies	the requirements	of section 607.0401 or	617,0401, F	.S., that all fees	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

SIGNATURE:





1455 Piper Boulevard ♦ Naples, FL 34110 Phone: (941) 598-1411 Toll Free: (800) 869-9812 Fax: (941) 598-1581

November 16, 1998

Division of Corporations Annual Report PO Box 6327 Tallahassee, FL 32314-6327

Annual Report

Dear Sirs:

Enclosed please find my check in the amount of \$61.25 for the annual report fee for Diamond Lake Condominium.

I apologize for the lateness of this report but I thought that this report had been filed by an employee of mine, it was not until I received your application for reinstatement that I learned that these matters were never taken care of.

Respectfully,