## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 17, 2001 8:00 am § Secretary of State DOCUMENT # N9700000726 1. Entity Name 05-17-2001 91334 008 \*\*\*\*61.25 DIAMOND LAKE MASTER ASSOCIATION, INC. Principal Place of Business Mailing Address UUU03014 37 MENTOR DR 1455 PIPER BLVD NAPLES FL 33943 NAPLES FL 34110 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0769539 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Box Number is Not Accepta NAJAR, JACOB 1455 PIPER BLVD NAPLES FL 33943 <sup>෭</sup>ඁඁ෯ඁ෯෦ඁ 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 SIGNATURE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD PD Delete TITLE TITI F DONNA PACE 1455 PIPER BLUD. NAJAR, JACOB NAME NAME 1455 PIPER BLVD STREET ADDRESS STREET ADDRESS NAPLES, FL CITY-ST-ZIP NAPLES FL 33942 CITY-ST-7IP TITLE ☐ Addition Delete TITLE PIPER BLUD BERNEH, JAN NAME NAME 1455 PIPER BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 33943 STD-TITLE TITLE Delete ---MARTIN, HARRY NAME NAME 1455 PIPER BLVD STREET ADDRESS STREET ADDRESS NAPLES FL 33943 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CJDY=ST-ZIP

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DONNA DACE SIGNATURE:

changed, or on an attachment with an address, with all other like empers

12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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