**FILED**
**Jun 27, 2003 8:00 am**
**Secretary of State**
05-05-2003 91391 045 ****61.25

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000000726

1. Entity Name
DIAMOND LAKE MASTER ASSOCIATION, INC.

55050068

| Principal Place of Business | Mailing Address |
|---|---|
| 1455 PIPER BLVD<br>NAPLES FL 33942 | 37 MENTOR DR<br>NAPLES FL 34110<br>US |

[redacted]

☑ CHECK HERE IF MAKING CHANGES

| 2. Principal Place of Business | 3. Mailing Address | 4. FEI Number 65-0769539 ☐ Applied For ☐ Not Applicable |
|---|---|---|
| ~~Advanced Property Management~~<br>~~ervice, Inc.~~<br>~~350 Woods Edge Circle, Ste 104~~<br>~~onita Springs, FL 34134~~ | **Advanced Property Management**<br>Service, Inc.<br>3350 Woods Edge Circle, Ste 104<br>Bonita Springs, FL 34134 | |
| Zip / Country | Zip / Country | 5. Certificate of Status Desired ☐ $8.75 Additional Fee Required |

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| THOMPSON, SUSAN L<br>37 MENTOR DRIVE<br>NAPLES FL 34110<br>**Advanced Property Management**<br>Service, Inc.<br>3350 Woods Edge Circle, Ste 104<br>Bonita Springs, FL 34134 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City FL Zip Code |

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: Susan L. Thompson SUSAN L. THOMPSON 6/8/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| FILE NOW: FEE IS $61.25 | 9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees | Make Check Payable to: Florida Department of State |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>BUTRYN, JUDITH<br>500 DIAMOND CIR. #2<br>NAPLES FL 34110 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>Secretary<br>Butryn, Judith S<br>500 Diamond Circle #2<br>Naples, FL. 34110 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>LUCIEN, RICHARD<br>700 DIAMOND CIR. #7<br>NAPLES FL 34110 | ☑ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>Treasurer<br>Beaupre, Richard T<br>500 Diamond Circle #7<br>Naples, FL. 34110 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>OLSON, CAROL<br>900 DIAMOND CIR. #4<br>NAPLES FL 34110 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>Vice President V.P<br>Olson, Carol<br>900 Diamond Circle #4 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>ZAKEM, LEONARD<br>1100 DIAMOND CIR. #4<br>NAPLES FL 34110 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>President P<br>Martin, Harry<br>100 Diamond Circle #3<br>Naples, FL. 34110 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E037 (10/02)

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 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: SIGNATURE REQUIRED 4/21/03 591-4525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #