2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007150

FILED Apr 21, 2008 Secretary of State

Entity Name: THE TAMPA DIAMOND CLUB, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3412 E LA TAMPA, F					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
POB 1136	57				
TAMPA, F					
FEI Number	: 59-3489745	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
LETT, MA 3208 44Th TAMPA, F	H STREET				
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electroni	c Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PC () LETT, MARCEL 3208 44TH ST TAMPA, FL 336	Delete 05	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	V () BELL, HENRY J 16410 BONNEV TAMPA, FL 336	LLE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () LEE, CLARENCI 5007 DERRY W TAMPA, FL 336	AY	Title: Name: Address: City-St-Zip:	() Change () Addition	
oity of Zip.					
Title: Name: Address: City-St-Zip:	S () RANCE, RALPH 5506 TERRACE TEMPLE TERRA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	RANCE, RALPH 5506 TERRACE TEMPLE TERRA	COURT #2 CE, FL 33617 Delete N VIEW DR	Name: Address:	() Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH RANCE S 04/21/2008