## 3/2 2000 UNIFORM BUSINESS REPORT (UBR). May 04, 2000 8:00 am Secretary of State DOCUMENT # **N99000000323** 1. Entity Name DIAMOND LAKE CONDOMINIUM ASSOCIATION E, INC. 03-20-2000 90001 014 \*\*\*\*61.25 Mailing Address Principal Place of Business GRAVELLOOP POULEVARD 1455-PIPER BOULEVARD MADLEO FL 93843. Naples fl. 34110-1308 2. Principal Place of Business 3. Mailing Address 37 MENTOR 31 MENTOR DRIVE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Oty & State Applied For NAPLES PLES Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired USA USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RENE -DRAKE, JENNIFER B -3111 STIRLING ROAD FORT LAUDERDALE FL 33312 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. FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. (66/6) Change PD TITLE TITLE Delete LEONARD ZAKEM NAME NAGAR, JACOB NAME 1100 DIAMOND CIRCLE STREET ADDRESS STREET ADDRESS 1455 PIPER BOULEVARD 34110 NAPLES, FL CITY-ST-ZIP CITY-ST-Z(P Naples FL 33943 ☐ Change Addition Delete TITLE IRENE COLE BERNERT, JAN NAME NAME 1000 DIAMOND CIRCLE # / STREET ADDRESS STREET ADDRESS 1455 PIPER BOULEVARD CITY-ST-ZIP CITY ST-7IP NAPLES FL 33943 Defete TITLE TITLE HENRY STEWART ROJAS, MARCO NAME NAMÉ 1100 DIAMOND CIRCLE STREET ADDRESS STREET ADDRESS 1455 PIPER BOULEVARD NAPLES, FL CITY-ST-7IP 34110 NAPLES FL 33943 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP s not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information users and that my signature shall have the same legal effect as if made under oath; that I am an officer or director code this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this filling indicated on this report or supplemental report is true a of the corporation or the receiver or trustee empower changed, or on an attachment with an address

SIGNATURE: