

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2000 8:00 am
Secretary of State

05-26-2000 90071 004 ****61.25
 09-12-2000 90015 048 ****61.25

DOCUMENT # N99000001002

1. Entity Name

DIAMOND RIDGE HOMEOWNERS ASSOCIATION, INC.

R

Principal Place of Business

Mailing Address

522 HIGHWAY 92
 AUBURNDALE FL 33823

522 HIGHWAY 92
 AUBURNDALE FL 33823

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DE

City & State

City & State

4. FEI Number

59-3577046

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIVEY, JAMES C.
 522 HIGHWAY 92
 AUBURNDALE FL 33823

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE *Robin Bratcher, Treasurer*

9/7/00

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
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Delete
NAME	SPIVEY, JAMES C	
STREET ADDRESS	522 HIGHWAY 92	
CITY-ST-ZIP	AUBURNDALE FL 33823	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SPIVEY, JAMES M	
STREET ADDRESS	522 HIGHWAY 92	
CITY-ST-ZIP	AUBURNDALE FL 33823	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SPIVEY, RODNEY	
STREET ADDRESS	522 HIGHWAY 92	
CITY-ST-ZIP	AUBURNDALE FL 33823	
TITLE	D	<input type="checkbox"/> Delete
NAME	Bratcher, Robin	Addition
STREET ADDRESS	208 Diamond Ridge Blvd	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE	D	<input type="checkbox"/> Delete
NAME	Stephens, Marcia	Addition
STREET ADDRESS	204 Diamond Ridge Blvd	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE	D	<input type="checkbox"/> Delete
NAME	Broxton, Jenny	Addition
STREET ADDRESS	209 Diamond Ridge Blvd	
CITY-ST-ZIP	Auburndale, FL 33823	

TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Camhouse, Charlene		
STREET ADDRESS	204 Diamond Ridge Blvd		
CITY-ST-ZIP	Auburndale, FL 33823		
TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Buchanan, Chuck		
STREET ADDRESS	232 Diamond Ridge Blvd		
CITY-ST-ZIP	Auburndale, FL 33823		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

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: *Robin Bratcher*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/00

DATE

813-965-6165

DAYTIME PHONE #

CR2E037 (5/00)