2007 NOT-FOR-PROFIT CORPORATION

FILED ANNUAL REPORT Jan 17, 2007 08:00 AM Secretary of State **DOCUMENT # N99000001002** DIAMOND RIDGE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address PO BOX 1373 522 HIGHWAY 92 AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 01112007 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3577046 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BECKMAN, BERNARD DO NOT WRITE 214 DIAMOND RIDGE BLVD AUBURNDALE, FL 33823 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agont signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Due by May 1, 2007 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME BLACKMAN, JIMMY STREET ADDRESS 160 DIAMOND RIDGE BLVD CITY - ST - ZIP AUBURNDALE, FL 33823 U00000588423 D1/17/07-80072-009 61.25 TITLE BECKMAN, BERNARD NAME STREET ADDRESS 214 DIAMOND RIDGE BLVD CITY-ST-ZIP AUBURNDALE, FL 33823 STREET ADDRESS DO NOT WRITE CITY-S1-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

ING OFFICER OR DIRECTOR