2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P0000014599 DIAMOND TITLE AND ASSOCIATES, INC. 04-26-2001 90132 007 ***150.00 Principal Place of Business Mailing Address 335 E. ROBERTSON ST. 335 E. ROBERTSON ST. BRANDON FL 33511 BRANDON FL 33511 2. Principal Place of Business 3. Mailing Address 115-B LITHIA - PINECREST 115-B LITTHA-PINECRES Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number 59-36/6432 City & State Applied For BRANDON, FL BRANDON, FL Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA ろろごり Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ELIZABETH A. GRIFFIN GRIFFIN, ELIZABETH A Street Address (P.O. Box Number is Not Acceptable) 335 E. ROBERTSON ST. 115-B LITHIA - PINECREST BRANDON FL 33511 Zip Code **335** // BRANDON 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 (NO1E: Hog-stored Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Delete TITLE TITLE ☐ Change Addition GRIFFIN, ELIZABETH NAME NAMS 2211 OAKLANE RD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7P VALRICO FL 33594 VICE PRES TITLE **Delete** TITLE Change **Addition** GRIFFIN ELITABETH 2211 OAKLANE RE ALVAREZ, HELEN NAME NAME STREET ADDRESS 8505 WOODHURST DR. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP VALRICO, FL 33594 **TAMPA FL 33615** SECRETARY TIT! F Delete TITLE ☐ Change Addition GRIFFIN, ELIZABETH 2211 OAKLANE Rd GRATIOT, PAM NAME NAME STREET ADDRESS 16605 E. COURSE DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TAMPA FL 33624 VALRICO, FL 33594 TITLE ☐ Delete TOTALE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CiTY-ST-7IP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS CHY-SI-ZIP

STREET ADDRESS

CITY -ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-7!P

SIGNATURE AND TYPED OR PRINTED THE OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete

4/18/01

8/3-643-1230

Change

Addition

Addition

Daytime Phone #