

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113857

Entity Name: HB DIAMOND SERVICES, INC.

FILED  
Apr 15, 2009  
Secretary of State

## Current Principal Place of Business:

5901 US 19 NORTH  
SUITE 7D  
NEW PORT RICHEY, FL 34652

## New Principal Place of Business:

## Current Mailing Address:

5901 US 19 NORTH  
SUITE 7D  
NEW PORT RICHEY, FL 34652

## New Mailing Address:

FEI Number: 59-3758879

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BURNARD, HARRY  
6031 RIVER RD.  
NEW PORT RICHEY, FL 34652 US

## Name and Address of New Registered Agent:

BURNARD, HARRY  
5901 US HIGHWAY 19  
7D  
NEW PORT RICHEY, FL 34652 US

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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/15/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BURNARD, HARRY  
Address: 6031 RIVER RD.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S ( ) Delete  
Name: WHITE, MARY A  
Address: 5901 US 19 SUITE 7D  
City-St-Zip: NEW PORT RICHEY, FL 34652

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BURNARD, HARRY  
Address: 5901 US19 SUITE 7D  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELISSA WADE

Electronic Signature of Signing Officer or Director

AA

04/15/2009

Date