

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-31-2006 90018 045 ***150.00

DOCUMENT # P03000039238

1. Entity Name
DIAMOND STAR HOMES, INC.



Principal Place of Business
**12627 SAN JOSE BLVD
STE 305
JACKSONVILLE, FL 32223 US**

Mailing Address
**12627 SAN JOSE BLVD
STE 305
JACKSONVILLE, FL 32223 US**

50007656



2. Principal Place of Business

**3697 Crown Point Ct.
Suite, Apt. #, etc.
2**

3. Mailing Address

**3697 Crown Point Ct.
Suite, Apt. #, etc.
2**

03072006 Chg-P CR2E034 (11/05)

City & State

Jacksonville, Fla

City & State

Jacksonville, Fla

4. FEI Number

20-0362171

Applied For

Not Applicable

Zip

32257

Country

Duval

Zip

32257

Country

Duval

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DUVAL, STEPHEN J
428 WALNUT STREET
GREEN COVE SPRINGS, FL 32043**

7. Name and Address of New Registered Agent

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. 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 Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **KEEN, CLYDE**
CITY-ST-ZIP **11355 BEAGLE LANE
JACKSONVILLE, FL 32221**

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **KEHOE, TOM**
CITY-ST-ZIP **4527 PRINCESS LABETH CT.
JACKSONVILLE, FL 32258**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **JOHNSON, TERRY**
CITY-ST-ZIP **1483 FLOYD JOHNS RD
JACKSONVILLE, FL 32234**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME **P**
STREET ADDRESS **Keen, Clyde**
CITY-ST-ZIP **11355 Beagle Lane
Jacksonville, FL 32221**

TITLE ☐ Change ☒ Addition
NAME **T**
STREET ADDRESS **Keen, Clyde**
CITY-ST-ZIP **11355 Beagle Lane
Jacksonville, FL 32221**

TITLE ☐ Change ☒ Addition
NAME **VP**
STREET ADDRESS **Johnson, Terry**
CITY-ST-ZIP **1483 Floyd Johns Rd.
Jacksonville, FL 32234**

TITLE ☐ Change ☒ Addition
NAME **S**
STREET ADDRESS **Johnson, Terry**
CITY-ST-ZIP **1483 Floyd Johns Rd.
Jacksonville, FL 32234**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby 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 607, 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:

Terry Johnson

03/09/06

(904) 886-3263

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #