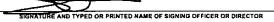
## **2006 FOR PROFIT CORPORATION** ANNUAL REPORT

## Apr 14, 2006 8:00 am Secretary of State DOCUMENT # P04000016922 04-14-2006 90148 030 \*\*\*158.75 DEANGELIS - DIAMOND REAL ESTATE, INC. Mailing Address Principal Place of Business 50012095 6635 WILLOW PARK DRIVE 6635 WILLOW PARK DRIVE NAPLES, FL 34109 NAPLES, FL 34109 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04112006 CR2E034 (11/05) Cha-P City & State City & State 4. FEI Number Applied For 02-0111369 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MONGAN, BRENTON L 6635 WILLOW PARK DRIVE Street Address (P.O. Box Number is Not Acceptable) NAPLES, FL 34109 City 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Change Addition DEANGELIS, JOHN M NAME NAME 2316 HARRIER RUN STREET ADDRESS STREET ADDRESS NAPLES, FL 34105 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NUNEZ, WILLIAM NAME NAME 6635 WILLOW PARK DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34109 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition DIAMOND, DAVID B NAME NAME STREET ADDRESS 28650 ALTESSA WAY NO. 201 STREET ADDRESS BONITA SPRINGS, FL 34135 CITY-ST-ZIP CITY-ST-78 Delete TITLE TITLE ☐ Change Addition MONGAN, BRENTON LEE NAME NAME STREET ADDRESS 27110 ESTHER DR. STREET ADDRESS BONITA SPRINGS-FL 34135 CITY-ST-ZIP-CITY-ST-ZIP-TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADORESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

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: \_



Date

Daytime Phone #

**FILED**