

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 30, 2007 8:00 am**  
**Secretary of State**

07-30-2007 90062 003 \*\*\*150.00

DOCUMENT # P04000064960

1. Entity Name

DIAMOND W. RODEO, INC.



Principal Place of Business

Mailing Address

~~10361 PITTMAN ROAD~~  
~~SARASOTA FL 34240~~

~~10361 PITTMAN ROAD~~  
~~SARASOTA FL 34240~~

2. Principal Place of Business

4512 9th St E

Suite, Apt. #, etc.

3. Mailing Address

4512 9th St E

Suite, Apt. #, etc.

City & State

Ellenton FL

City & State

Ellenton FL

4. FEI Number

06-1722727

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MANLEY, CHARLOTTE A  
10361 PITTMAN ROAD  
SARASOTA FL 34240

7. Name and Address of New Registered Agent

Name

Katherine Walker

Street Address (P.O. Box Number is Not Acceptable)

4512 9th St E

City

Ellenton

FL

Zip Code

34222

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

*Katherine Walker*

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**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE PST  
NAME MANLEY, CHARLOTTE A  
STREET ADDRESS 10361 PITTMAN ROAD  
CITY-ST-ZIP SARASOTA FL 34240 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST  
NAME Katherine Walker ☒ Change ☐ Addition  
STREET ADDRESS 4512 9th St E  
CITY-ST-ZIP Bradenton FL 34222

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Katherine Walker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-24-7

No, prior  
notice