

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000116537

Entity Name: DIAMOND DUST, INC.

FILED  
Apr 23, 2007  
Secretary of State

## Current Principal Place of Business:

16090 CORTEZ BOULEVARD  
BROOKSVILLE, FL 34613 US

## New Principal Place of Business:

## Current Mailing Address:

16090 CORTEZ BOULEVARD  
BROOKSVILLE, FL 34613 US

## New Mailing Address:

27315 POPIEL ROAD  
BROOKSVILLE, FL 34613 US

FEI Number: 20-1472685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

M & L ACCOUNTING  
1389 HAULOVER AVENUE  
SPRING HILL, FL 34608 US

## Name and Address of New Registered Agent:

BROWN, LISA  
27315 POPIEL ROAD  
BROOKSVILLE, FL 34602 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: LISA BROWN

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P,S ( ) Delete  
Name: MORELAND, KATHY  
Address: 16090 CORTEZ BOULEVARD  
City-St-Zip: BROOKSVILLE, FL 34613 US

Title: VP,D ( ) Delete  
Name: MORELAND, KATHY  
Address: 16090 CORTEZ BOULEVARD  
City-St-Zip: BROOKSVILLE, FL 34613 US

Title: D,T ( ) Delete  
Name: MORELAND, KATHY  
Address: 16090 CORTEZ BOULEVARD  
City-St-Zip: BROOKSVILLE, FL 34613 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change ( ) Addition  
Name: BROWN, LISA  
Address: 16090 CORTEZ BOULEVARD  
City-St-Zip: BROOKSVILLE, FL 34613 US

Title: VP,D (X) Change ( ) Addition  
Name: BROWN, LISA  
Address: 16090 CORTEZ BOULEVARD  
City-St-Zip: BROOKSVILLE, FL 34613 US

Title: D,T (X) Change ( ) Addition  
Name: BROWN, LISA  
Address: 16090 CORTEZ BOULEVARD  
City-St-Zip: BROOKSVILLE, FL 34613 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA BROWN

P.S.

04/23/2007

Electronic Signature of Signing Officer or Director

Date