FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000025199 (9)**

1. Corporation Name
DIAMOND A ENTERTAINMENT, INC.

Principal Place of Business	Mailing Address
~~3650 FOWLER ST.~~ FT. MYERS FL	C/O ROBERT D ROYSTON, JR. PA 12670 NEW BRITTANY BLVD. STE 101 FT MYERS FL 33907 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/06/1993	3a. Date of Last Report: 04/21/1994
4. FEI Number: 65-0399748	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 5309 Summerlin Rd.	26
Suite, Apt. #, etc. 22 Apt. 1	Suite, Apt. #, etc. 27
City & State 23 Fort Myers, FL	City & State 28
Zip 24 33919 Country 25 Lee	Zip 29 Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ROYSTON, ROBERT D JR % COSTELLO, SIMS & ROYSTON 12670 NEW BRITTANY BLVD., #101 FT. MYERS FL 33907	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	S,T	☑ Change ☐ Addition
NAME	MARTIN, ROGER J	1.2 NAME	Roger J. Martin	
STREET ADDRESS	3650 Fowler St.	1.3 STREET ADDRESS	5309 Summerlin Rd., #14	
CITY-ST-ZIP	FT. MYERS FL 33919	1.4 CITY-ST-ZIP	Fort Myers, FL 33919	
TITLE	P,S,T	2.1 TITLE	P,D	☑ Change ☐ Addition
NAME	TRACY, DOUGLAS L	2.2 NAME	Douglas L. Tracy	
STREET ADDRESS	3650 Fowler St.	2.3 STREET ADDRESS	5309 Summerlin Rd., #1	
CITY-ST-ZIP	FT MYERS FL 33919	2.4 CITY-ST-ZIP	Fort Myers, FL 33919	
TITLE		3.1 TITLE	V-P	☐ Change ☑ Addition
NAME		3.2 NAME	Dion Callan	
STREET ADDRESS		3.3 STREET ADDRESS	20384 Copeland Avenue	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Port Charlotte, FL 33952	
TITLE		4.1 TITLE	V-P	☐ Change ☑ Addition
NAME		4.2 NAME	Patrick Piecura	
STREET ADDRESS		4.3 STREET ADDRESS	1419 NE Vauloon Terrace	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Cape Coral, FL 33909	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Douglas Tracy, Pres. 4-28-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0981783 CP