

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000056611

1. Entity Name

DIAMOND METAL CO., INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90072 032 ***150.00

Principal Place of Business

Mailing Address

5520 TYLER ST.
JACKSONVILLE FL 32254
US

5520 TYLER ST.
JACKSONVILLE FL 32254-3666
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3196271

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TEETER, JOHN C
5510 TYLER STREET
JACKSONVILLE FL 32254

Name John C. TEETER

Street Address (P.O. Box Number is Not Acceptable)
5520 TYLER AVE

City JACKSONVILLE FL Zip Code 32254

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.

SIGNATURE

John C. Teeter John C. TEETER President

4-11-2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME TEETER, JOHN C
STREET ADDRESS 5510 TYLER STREET
CITY-ST-ZIP JACKSONVILLE FL 32254

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME DALE RHODES
STREET ADDRESS 1467 DOLPH RD
CITY-ST-ZIP JACKSONVILLE FL 32220

TITLE D ☒ Delete
NAME CARTER, QUITMAN E
STREET ADDRESS 8826 TRILBY AVE
CITY-ST-ZIP JACKSONVILLE FL 32222

TITLE SECRETARY ☐ Change ☒ Addition
NAME JANICE WILSON
STREET ADDRESS 10025 RUSSELL SAMPSON RD.
CITY-ST-ZIP JACKSONVILLE FL 32225

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TREASURER ☐ Change ☒ Addition
NAME HENRY JAMES HOPTINS
STREET ADDRESS 606 SHOREWOOD DR.
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John C. Teeter John C. TEETER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-2000

Date

904-7812015

Daytime Phone #

CR2E034 (9/99)