PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000063859**1. Corporation Name

DIAMOND LAND & DEVELOPMENT, INC.

OUG DATE TUCKE DILLE	
SUITE 500	
3011L 300	
MARCO ISLAND FL-39969	

2. Principal Place of Business

Principal Place of Business

COC DALD EAGLE DRIVE

Mailing Address

2a. Mailing Address

P.O. BOX ONE

MARÇO ISLAND FL 39969-

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90037 029 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualifed

09/07/1993

4. FEI Number

11	2	6					Not	Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			65-0441295 5. Certifcate of Status Desired		\$8.75 A	I		
City & State	2	City & State			Election Campaign Financing Trust Fund Contribution		- \$5.00 n Added to	, ,		
Zip 4 (341	Country 25 25 2	Zip Country			This corporation owes the current Personal Property Tax.	rrent year Int	angible Yes	ŒŃo		
	9. Name and Address of Current Re	gistered Agent			10. Name and Address of New	Registered	Agent			
		<u></u>	81	Name				İ		
WOOD WARD, CRAIG R			82	82 Street Address (P.O. Box Number is Not Acceptable)						
606 BALD EAGLE DRIVE										
MARCO ISLAND FL -30997			83					}		
			84	City			85 Zip C	ode		
			04	City		FL	. " 34"	145		
11. Pursuant	to the provisions of Sections 607.0502 and	d 607.1508, Florida Statutes,	the above	e-named corp	poration submits this statement for the	e 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.										
-	A laminal way, and aboops no bonganone						•	}		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DI	RECTORS	13.		ADDITIONS/CHANGES TO C	FFICERS AN				
TITLE	D	☐ DELETE	1,1 TITLE				Change	☐ Addition [
NAME	MCGEE, JAMES		1.2 NAME					İ		
STREET ADDRESS	178 STILLWATER COURT		1.3 STREET	ADDRESS						
CITY-ST-ZIP	MARCO ISLAND FL-83937		1.4 CITY-S	r-zie	34145					
TITLE		☐ DELETE	2.1 TITLE				☐ Change	☐ Addition		
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREET	ADDRESS				İ		
CITY-ST-ZIP			2.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	3.1 TITLE		- -	,	Change	☐ Addition		
NAME			3.2 NAME							
STREET ADDRESS			33 STREET	ADDRESS						
CITY-ST-ZIP			3.4. CITY-S	T-ZIP						
TITLE		☐ DELETE	4.1 TITLE				☐ Change	☐ Addition		
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE	ADORESS						
CITY-ST-ZIP			4.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition		
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET	ADDRESS						
CITY-ST-ZIP			5.4 CITY-S	r-z i P						
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition		
NAME		,	6.2 NAME							
STREET ADDRESS			6.3 STREET	TADDRESS				-		
CITY-ST-ZIP			6.4 CITY-S	T-ZIP						
44	actifuthat the information cumplied with th	in filing door and qualify for th	o overnot	ion stated in	Section 119 07/3)(i) Florida Statute	I further cer	tify that the ir	normation		

Indicated on this annual report or supplied with rais ining does not quanty for me exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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, with all other like empowered.