

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000007432



1. Entity Name

DIAMOND HOMES OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

4441 SOUTH TAMIAMI TRAIL
STE B
SARASOTA FL 34231
US

Mailing Address

P O BOX 21238
STE B
SARASOTA FL 34276-238
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 58-2154815

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, MICHAEL
4441 SOUTH TAMIAMI TRAIL, STE B
SARASOTA FL 34231

Name

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

City

FL

Zip Code

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

Michael J. Johnson Michael J. Johnson

4/5/07

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

(NOTE: Registered Agent signature required when registering.)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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 DP ☐ Delete
NAME JOHNSON, MICHAEL J
STREET ADDRESS P.O. BOX 21238 N/A
CITY-STATE-ZIP SARASOTA FL 34276-4238

TITLE D ☐ Delete
NAME TERRY, EDWARD L
STREET ADDRESS 2401 LAKE PARK DR STE 355
CITY-STATE-ZIP SMYRNA GA 30080

TITLE VP/S ☐ Delete
NAME COLE, MARIE M VP/SEC
STREET ADDRESS 2401 LAKE PARK DRIVE, SUITE 355
CITY-STATE-ZIP SMYRNA GA 30080

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 0000000705570
CITY-STATE-ZIP 04/23/07-80057-007 150.00

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

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

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:

Michael J. Johnson Michael J. Johnson Pres. 4/5/07 941-927-9884

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #