

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000076928

FILED  
Feb 11, 2002 8:00 AM  
Secretary of State

Entity Name: DIAMOND MAY MINING COMPANY

## Current Principal Place of Business:

ONE PROGRESS PLAZA  
SUITE 15A  
ST. PETERSBURG, FL 33701

## New Principal Place of Business:

100 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701

## Current Mailing Address:

P.O. BOX 1551  
PEB 17B5  
RALEIGH, NC 27602

## New Mailing Address:

FEI Number: 65-0622351      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOODWIN, SUZANNE C  
100 CENTRAL AVENUE  
ST. PETERSBURG, FL 337013324 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KILGORE, TOM D  
Address: P.O. BOX 1551, 410 S. WILMINGTON ST.  
City-St-Zip: RALEIGH, NC 27602

Title: CSD ( ) Delete  
Name: SCHILLER, FRANK A  
Address: P.O. BOX 1551, 410 S. WILMINGTON ST.  
City-St-Zip: RALEIGH, NC 27602

Title: VT ( ) Delete  
Name: HOPKINS, SAMUEL M II  
Address: ONE PROGRESS PLAZA  
City-St-Zip: ST PETERSBURG, FL 33701

Title: D ( ) Delete  
Name: SULLIVAN, THOMAS R  
Address: P.O. BOX 1551, 410 S. WILMINGTON ST.  
City-St-Zip: RALEIGH, NC 27602

Title: CEO (X) Delete  
Name: MEADE, L.E. JR.  
Address: P.O. BOX 1551, 410 S. WILMINGTON ST.  
City-St-Zip: RALEIGH, NC 27602

Title: DP ( ) Delete  
Name: SMITH, GARY JOE  
Address: 1045 ARNOLD FORK RD  
City-St-Zip: KITE, KY 41828

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: SMITH, GARY JOE  
Address: 1045 ARNOLD FORK RD  
City-St-Zip: KITE, KY 41828

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK A SCHILLER

CSD

02/11/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date