


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2007 08:00 AM
Secretary of State

DOCUMENT # P96000026259
 1. Entity Name
 DIAMOND EDUCATIONAL PRODUCTIONS, INC.



Principal Place of Business
 208 SEA ISLAND DR
 PONTE VEDRA BEACH, FL 32082

Mailing Address
 208 SEA ISLAND DR
 PONTE VEDRA BEACH, FL 32082

DO NOT WRITE IN THIS SPACE



07042007 No Chg-P CR2E034 (11/05)

4. FEI Number
 59-3401319

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 DIAMOND, ELLEN
 208 SEA ISLAND DRIVE
 PONTE VEDRA BEACH, FL 32082

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

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DIAMOND, ELLEN 208 SEA ISLAND DR PONTE VEDRA BEACH, FL 32082
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CLEMENTS, STEVEN 208 SEA ISLAND DR PONTE VEDRA BEACH, FL 32082
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 any other like empowered.

SIGNATURE:  DATE: 7/5/07 DAYTIME PHONE # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR