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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000049682 (2)

DIAMOND COURT HOMES, INC.

FILED

Mar 19 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address 1855 SW LA GORCE AVE PT ST LUCIE FL 34953 1655 SW LA GORCE AVE PT ST LUCIE FL 34953 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/01/1997 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 65-0812603 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 4 Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **COLLINS, LANCE W** 81 Name 1655 SW LA GORCE AVE 82 Street Address (P.O. Box Number is Not Acceptable) PT ST LUCIE FL 34953 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the 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. SIGNATURE Signature, typod or ponted name of registered agent and the diapplicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TOLE Change Addition LANCE IN. COLLINS 1.2 NAME 1655 SW LAGORCE ANE. STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP PORT ST- LUCIE 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition JENNIFER COLLINS NAME 2.2 NAME 1655 SW LAGORCE AVE STREET ADDRESS 2.3 STREET ADDRESS CITY-S1-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4, CITY-ST-ZIP DELETE Addition TITLE Change 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE THILE Change Addition 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5 4 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this 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 disporation of the receiver or fusion empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attraction with an address. HRESIDENT

SIGNATURE:

LANCE W. COLLINS 3-12-98 561-336-3486