## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT\_\_\_ CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000067981

1. Corporation Name

DIAMOND MOTORS OF FT. MYERS, INC.

Principal Place of Business
-----------------------------

Mailing Address

1132-C PONDELLA ROAD N. FORT MYERS FL 33903 1132-C PONDELLA ROAD N. FORT MYERS FL 33903

## **FILED** Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90053 045 \*\*\*150.00



N. FORI MICH	5 FL 33303	N. FORT MIERS FL 33303			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					08/04/1997		ļ	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applie	d For	
21	•	26			65-0771336	Not Ar	pplicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	<b>\$8.75</b> Addi		
22 27					3. Certificate of Status Desired	Fee Requir	red	
City & State City & State					6. Election Campaign Financing	\$5.00 ма	y Be	
23		28		: .	Trust Fund Contribution	Added to F	ees	
_ Zip	Country	Zip	Country	,	8. This corporation owes the current year Inta-			
24	25	29 30	<u> </u>		T Digottar i Taporty	☐ Yes ☐1	No	
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Registered A	gent		
DEDOUGH CHELLY A				Name			,	
DEROUEN, SHELLY A				Street Addre	ess (P.O. Box Number is Not Acceptable)	<del></del>		
1953 COLONIAL BLVD,			Ĺ		····			
`	MYER\$ FL 33907		83	Į.	·			
-			84	City		85 Zip Cod	 le	
	•		- }	1		1 1	}	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named corpo	oration submits this statement for the purpose of c n's board of directors. I hereby accept the appoint	hanging its reg	jistered ered	
ottice or re	egistered agent, or both, in the State of m familia with, and accept the obligati	ons et. 3 dien 607.0505, Florida	onzeo by a Statutes	тив сопрогациі 5.	ins board of directors. Thereby accept the appoint	ment as regist		
SIGNATURE	Morning H 1	Tulm			3-17-29			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age	nt signature required	when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	PTD	☐ DELETÉ	1.1 TITLE			☐ Change	Addition	
NAME	DIETRICH, THOMAS H		1.2 NAME		•		{	
STREET ADDRESS	1132-C PONDELLA ROAD		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	N. FORT MYERS FL 33903		1.4 CITY-S	T-ZIP				
TITLE	VSD	☐ DELETE	2.1 TITLE	1	·	Change {	Addition	
NAME	MORGAN, HENRY A		2.2 NAME	}	•		}	
STREET ADDRESS	1132-C PONDELLA ROAD		2.3 STREE	T ADDRESS			ł	
CITY-ST-ZIP	N. FORT MYERS FL 33903		2. 4 CITY-	ST-ZIP				
, TITLE .		→ DELETE	3.1-TITLE	-j·	والمستخد والم والمستخد والمستخد والمستخد والمستخد والمستخد والمستخد والمستخ	☐ Change [	Addition	
NAME		I	3.2 NAME	)			1	
STREET ADDRESS			3.3 STREE	TADORESS				
CITY-ST-ZIP	·		3.4, CITY-5	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change [	Addition	
NAME	•		4. 2 NAME				ĺ	
STREET ADDRESS			4.3 STREE	T ADORESS	٠.		ĺ	
CITY-ST-ZIP			4.4 CITY- S	T-ZIP				
TITLE .		☐ DELETE	5.1 TITLE	- "	•	Change (	☐ Addition	
NAME			5.2 NAME				-	
STREET ADDRESS	•	•	5.3 STREE	T ADDRESS		•	ł	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		·		
TITLE		☐ DELETÈ	6.1 TITLE			☐ Change	Addition	
NAME ·			6.2 NAME					
STREET ADDRESS			6.3 STREE	TADORESS			}	
C/TY-ST-ZIP			6.4 CITY-S	ST-ZIP			J	
- SACCE SCREET	<u> </u>			<del></del>	440 07(0)(2) F1 11 (0) 44 - 15 (b)	if that the infor		

I hereby certify that the information supplied with this filing does 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 or supplemental 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.

SIGNATURE:

STANKELLEY DESCRIPTION SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR