2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P98000027962 **DOCUMENT #**

1. Entity Name

FIVE DIAMOND PROPERTIES, INC.



FILED Jan 17, 2003 8:00 am Secretary of State 01-17-2003 90038 040 ***150.00

				<u>'</u>			
Principal Place of Business % JEFFREY LEDWARD 6249-8 PRESIDENTIAL COURT FT MYERS FL 33919		Mailing Address % JEFFREY LEDWARD 6249-B PRESIDENTIAL COURT FT MYERS FL 33919					
2. Principal Place of Business		3. Mailing Address		I POOLITOOT HE TOTAL TERMIN DE	1(1 30 (1) 00 (1) 00 (1) 10(1 10(1) 1	03)0 03(10 1420 302)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK H	CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 65-0823	FEI Number 65-0823398 Applied For Not Applied by		
Zip Country		Zip -	Country	Country 5. Certificate of Status Desi		Additional uired	
6. Name and Address of Current		Registered Agent		7. Name and Address of N	7. Name and Address of New Registered Agent		
		<u> </u>	Name	Name			
MCMENAMY, JAMES B			Street Add	dress (P.O. Box Number is Not Accep	itable)		
7910 SUMMERLYN LAKES FT MYERS FL 33907				<u> </u>	,		
à			City		FL	Code	
	named entity submits this statement fo ons of registered agent.	r the purpose of changing its	registered office or re	egistered agent, or both, in the State	of Florida. I am familiar w	vith, and accept	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signature	e required when reinstating)	DATE	·	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS				9. Election Campaig Trust Fund Contri ADDITIONS/CHANGES TO	bution. A	5.00 May Be dided to Fees	
TITLE	PD	☐ Delete	TITLE		Char	nge Addition	
NAME STREET ADDRESS CITY-ST-ZIP	MCMENAMY, JAMES B 7910 SUMERLYN LAKES DR FT MYERS FL 33907	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	VD BURKE, HARALD J 6249-B PRESIDENTIAL COURT FT_MYERS FL 33919	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Char	nge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HOWARD, JOSEPH G 623 SW 53 TERR CAPE CORAL FL 33914	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Char	nge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GEML, MICHAEL P 1316 SE 32ND TERR CAPE CORAL FL 33904	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Char	nge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEDWARD, JEFFREY C 6249-B PRESIDENTIAL COURT FT MYERS FL 33919	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Char	nge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Char	nge 🗌 Addition	

12. I hereby certify that the information supplied with this filling does not qualify 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 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.