

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90026 014 ***150.00

DOCUMENT # P98000030164

1. Entity Name

DIAMOND HOME EQUITY SERVICES, INC.

Principal Place of Business

**3811 BLANDING BLVD.
 SUITE 3
 JACKSONVILLE FL 32210
 US**

Mailing Address

**3811 BLANDING BLVD.
 SUITE 3
 JACKSONVILLE FL 32210
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**767 Blanding Blvd
 Suite, Apt. #, etc.
 Suite 106**

3. Mailing Address

**767 Blanding Blvd.
 Suite, Apt. #, etc.
 Suite 106**

City & State

Orange Park, FL

City & State

Orange Park, FL

4. FEI Number

59-3500366

Applied For

Not Applicable

Zip

FL 32065

Country

US

Zip

32065

Country

US

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MORGAN, VICKIE L
 514 ROCKWOOD COURT
 ORANGE PARK FL 32065**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D MORGAN, VICKIE L	459 HOPE HULL CT	GREEN COVE SPRINGS FL 32043	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Vickie Morgan**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-02 **904-272-3600**
 Date Daytime Phone #

0025447 AV

CR2E034 (9/01)