2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 20, 2006 08:00 AM DOCUMENT # P99000047642 **Secretary of State** 1. Entity Name DIAMOND HOMES & DEVELOPMENT, I/IC. Principal Place of Business Mailing Address 516 HARBOUR ROAD 516 HARBOUR ROAD NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408 No Chg-P CR2E034 (11/05) 01162006 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0922080 Not Applicat \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. DO NOT WRITE 1840 CORAL WAY MIAMI, FL 33145 IN THIS SPACE 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 acceptable of the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE U00000392011 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 01/24/06-80063-016 150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PSTD TITLE FOWLER, BARRY D MAME STREET ADDRESS 516 HARBOUR ROAD CITY-ST-ZIP NORTH PALM BEACH, FL 33408 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or symplemental 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 direction of the receiver or trustee empowered to execute this seport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachinent with an address, with all offer like empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

SHATURE AND SPEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRY D. FOWLER 1-16-06
DIRECTOR SOL- STATES