

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000000902

**FILED**  
**Mar 15, 2016**  
**Secretary of State**  
**CC0362281556**

**Entity Name:** DIAMOND RIDGE CENTER ASSOCIATION, INC.

**Current Principal Place of Business:**

3365 WOODS EDGE CIRCLE  
SUITE #102  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

3365 WOODS EDGE CIRCLE  
SUITE #102  
BONITA SPRINGS, FL 34134

**FEI Number:** 20-5453817

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KW PROPERTY MANAGEMENT & CONSULTING, LLC  
3365 WOODS EDGE CIRCLE  
SUITE #102  
BONITA SPRINGS, FL 34134 US

*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:** AL PEREZ

03/15/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MANHEIMER, MARK  
Address 3365 WOODS EDGE CIRCLE, SUITE 102  
City-State-Zip: BONITA SPRINGS FL 34134

Title VP  
Name TOTHEROW, BILL  
Address 3365 WOODS EDGE CIRCLE SUITE #102  
City-State-Zip: BONITA SPRINGS FL 34134

Title T  
Name PRUITT, SANDI  
Address 3365 WOODS EDGE CIRCLE SUITE #102  
City-State-Zip: BONITA SPRINGS FL 34134

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SANDI PRUITT

**TREASURER**

03/15/2016

Electronic Signature of Signing Officer/Director Detail

Date