

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006096

FILED
May 15, 2007
Secretary of State

Entity Name: DIVERSIFIED INVESTORS SECURITIES CORP

Current Principal Place of Business:

12690 PRIMERO CT
PENSACOLA, FL 32507

New Principal Place of Business:

Current Mailing Address:

4 MANHATTANVILLE ROAD
PURCHASE, NY 10577

New Mailing Address:

FEI Number: 13-3696753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: RESNIK, RICK
Address: 4 MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

Title: D () Delete
Name: PRINCIPAL, QUEDEL
Address: 4 MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

Title: P () Delete
Name: WEAIVING, EDWARD
Address: 4 MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

Title: S () Delete
Name: COLBY, ROBERT
Address: 4 MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

Title: T () Delete
Name: CALVI, ENNA
Address: 4 MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: CARUSONE, JOSEPH
Address: 4 MANHATTANVILLE RD
City-St-Zip: PURCHASE, NY 10577

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICK RESNIK

DVP

05/15/2007

Electronic Signature of Signing Officer or Director

_____ Date