

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022230

FILED  
May 03, 2005  
Secretary of State

Entity Name: DIVERSIFIED ASSOCIATES, LLC

## Current Principal Place of Business:

2111 NORTH GOLFVIEW DRIVE  
PLANT CITY, FL 33566 US

## New Principal Place of Business:

## Current Mailing Address:

100 E. GRAND AVE  
BELOIT, WI 53511

## New Mailing Address:

ONE MILLINGTON ROAD  
BELOIT, WI 53511

FEI Number: 03-0373923      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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

## MANAGING MEMBERS/MEMBERS:

Title: PD ( ) Delete  
Name: LANE, KEVIN  
Address: 6133 N. RIVER RD., SUITE 670  
City-St-Zip: DES PLAINES, IL 60018 US

Title: VD (X) Delete  
Name: EARLEY, MARK  
Address: 100 E. GRAND AVE  
City-St-Zip: BELOIT, WI 53511 US

Title: VCP ( ) Delete  
Name: O'NEILL, MICHAEL  
Address: 6133 N. RIVER RD  
City-St-Zip: DES PLAINES, IL 60018 US

Title: VS ( ) Delete  
Name: COOLE, WILLIAM  
Address: 100 E. GRAND AVE  
City-St-Zip: BELOIT, WI 53511

## ADDITIONS/CHANGES:

Title: PD (X) Change ( ) Addition  
Name: LANE, KEVIN  
Address: 3406 CITY PLACE  
City-St-Zip: EDGEWATER, NJ 07020 US

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

Title: VCP (X) Change ( ) Addition  
Name: O'NEILL, MICHAEL  
Address: 3309 CITY PLACE  
City-St-Zip: EDGEWATER, NJ 07020 US

Title: VS (X) Change ( ) Addition  
Name: COOLE, WILLIAM  
Address: ONE MILLINGTON ROAD  
City-St-Zip: BELOIT, WI 53511

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GERARD A. BEHAN

VCFO

05/03/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date