

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018350

Entity Name: DIVERSE HOLDINGS LLC

FILED  
Apr 25, 2008  
Secretary of State

## Current Principal Place of Business:

6609 RIDGE ROAD #4  
PORT RICHEY, FL 34668

## New Principal Place of Business:

## Current Mailing Address:

6609 RIDGE ROAD #4  
PORT RICHEY, FL 34668

## New Mailing Address:

13023 SIRIUS LANE  
HUDSON, FL 34667

FEI Number: 04-3713162

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAYES, DANIEL M  
6609 RIDGE ROAD #4  
PORT RICHEY, FL 34668 US

## Name and Address of New Registered Agent:

HAYES, DANIEL M  
6609 RIDGE RD #4  
PORT RICHEY, FL 34668 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:

04/25/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HAYES, DANIEL  
Address: 60 SQUIRES LANE  
City-St-Zip: CANDLER, NC 28715

Title: MGRM ( ) Delete  
Name: HAYES, MARIBEL  
Address: 60 SQUIRES LANE  
City-St-Zip: CANDLER, NC 28715

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HAYES, DANIEL  
Address: 13023 SIRIUS LANE  
City-St-Zip: HUDSON, FL 34667

Title: MGRM (X) Change ( ) Addition  
Name: HAYES, MARIBEL  
Address: 13023 SIRIUS LANE  
City-St-Zip: HUDSON, FL 34667

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 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: DANIEL HAYES

MAN

04/25/2008

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