

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000023329

Entity Name: DIACOM REALTY, LC

FILED
Mar 28, 2008
Secretary of State

Current Principal Place of Business:

C/O DLA PIPER
101 EAST KENNEDY BLVD., SUITE 2000
TAMPA, FL 33602

Current Mailing Address:

C/O DLA PIPER (JTD)
101 EAST KENNEDY BLVD., SUITE 2000
TAMPA, FL 33602

New Principal Place of Business:

C/O D2 LAW GROUP P.L.
3239 HENDERSON BOULEVARD, SECOND FLOOR
TAMPA, FL 33609

New Mailing Address:

C/O D2 LAW GROUP P.L.
3239 HENDERSON BOULEVARD, SECOND FLOOR
TAMPA, FL 33609

FEI Number: 13-4222989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAMANDIS, JOHN T
101 EAST KENNEDY BLVD., SUITE 2000
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

DIAMANDIS, JOHN T
3239 HENDERSON BOULEVARD, SECOND FLOOR
TAMPA, FL 33609 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: JOHN T. DIAMANDIS

03/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DIAMANDIS, JOHN T
Address: 101 EAST KENNEDY BLVD., SUITE 2000
City-St-Zip: TAMPA, FL 336025149

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DIAMANDIS, JOHN T
Address: 3239 HENDERSON BOULEVARD, SECOND FLOOR
City-St-Zip: TAMPA, FL 33609

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: JOHN T. DIAMANDIS

MGRM

03/28/2008

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