(352)625+9099

1-8-05

## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: Pichard H. Houle, Richard H. HOULE

## ANNUAL REPORT **DOCUMENT # L03000026266** 1. Entity Name DIVERSIFED ENTERPRISES LLC Principal Place of Business Mailing Address 10650 NE HWY. 314 10650 NE HWY. 314 SILVER SPRINGS, FL 34488 SILVER SPRINGS, FL 34488 en en la companya de la co 01082005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 02-0699526 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOULE, MARY ANN DO NOT WRITE 10650 NE HWY. 314 SILVER SPRINGS, FL 34488 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. U00000175877 TITLE 01/10/05-80068-019 50.00 HOULE, MARY ANN L NAME STREET ADDRESS 10650 NE HWY. 314 SILVER SPRINGS, FL 34488 CITY-ST-ZIP TITLE HOULE, RICHARD H NAME STREET ADDRESS 10650 NE HWY. 314 CITY-ST-ZIP SILVER SPRINGS, FL 34488 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify 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 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.