

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020551

Entity Name: DIVERSITY, LLC

FILED
Apr 17, 2006
Secretary of State

Current Principal Place of Business:

1600 SW 42ND STREET
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

PO BOX 5627
OCALA, FL 34478

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMASWAMI, SUKUMARAN R
1600 SW 42ND STREET
OCALA, FL 34478 US

Name and Address of New Registered Agent:

RAMASWAMI, WENDI L
1600 SW 42ND STREET
OCALA, FL 34474 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: WENDI L. RAMASWAMI

04/17/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HELFIN, GARY
Address: 1406 SE 48TH AVENUE
City-St-Zip: OCALA, FL 34471

Title: MGRM (X) Delete
Name: KATHIRIPILLAI, KETHERSWARAN
Address: 3585 SW 24TH AVENUE ROAD
City-St-Zip: OCALA, FL 34474

Title: MGRM (X) Delete
Name: MITCHELL, LILLIAN A
Address: 701 SE 48TH AVENUE
City-St-Zip: OCALA, FL 34471

Title: MGRM (X) Delete
Name: RAMASWAMI, SUKUMARAN R
Address: 1600 SW 42ND STREET
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RAMASWAMI, WENDI L
Address: 1600 SW 42 STREET
City-St-Zip: OCALA, FL 34474

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

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 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: WENDI L. RAMASWAMI

MGRM

04/17/2006

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