2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017026

City-St-Zip:

BOYNTON BEACH, FL 33435

Entity Name: ABA DIVERSIFIED INVESTMENTS, LLC

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2828 S. SEACREST BOULEVARD, SUITE 210 2828 S. SEACREST BOULEVARD BOYNTON BEACH, FL 33435

SUITE 210

BOYNTON BEACH, FL 33435

Current Mailing Address: New Mailing Address:

2828 S. SEACREST BOULEVARD 2828 S. SEACREST BOULEVARD, SUITE 210 SUITE 210 BOYNTON BEACH, FL 33435

City-St-Zip:

BOYNTON BEACH, FL 33435

BOYNTON BEACH, FL 33435 US

FEI Number: 20-4317179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MONAGHAN, TIMOTHY E GATZ, BART G 54 N.E. FOURTH AVENUE 2828 S SEACREST BOULEVARD

DELRAY BEACH, FL 33483 US SUITE 210 BOYNTON BEACH, FL 33435 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: BART G GATZ 01/19/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete

(X) Change () Addition REAL DIVERSIFIED INV, ESTMENTS LLC REAL DIVERSIFIED INV, ESTMENTS LLC Name: Name: 2828 SEACREST BLVD STE 210 Address: 2828 SEACREST BLVD STE 210 Address:

City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: BOYNTON BEACH, FL 33435

Title: Title: (X) Change () Addition () Delete GATZ FAMILY LIMITED, PARTNERSHIP Name: GATZ FAMILY LIMITED, PARTNERSHIP Name: Address: 2828 S SEACREST BLVD STE 210 Address: 2828 S SEACREST BLVD STE 210

City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: BOYNTON BEACH, FL 33435

Title: () Delete Title: MGRM (X) Change () Addition RIA INVESTMENTS LLC, Name: RIA INVESTMENTS LLC, Name: 2828 S SEACREST BLVD STE 210 2828 S SEACREST BLVD STE 210 Address: Address:

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: BART G GATZ **MGRM** 01/19/2009