2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 09, 2007
Secretary of State

DOCUMENT# L06000031777

Entity Name: DIVERSIFIED RESIDENTIAL SERVICES L.L.C.

Current Principal Place of Business:

985 SADDLEBACK RIDGE RD.
APOPKA, FL 32703

New Principal Place of Business:

1738 GOLF WINDS COURT
APOPKA, FL 32712

Current Mailing Address:

985 SADDLEBACK RIDGE RD.
APOPKA, FL 32703

New Mailing Address:

P O BOX 365
APOPKA, FL 32707

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GRIFFITH, JOHN F
985 SADDLEBACK RIDGE RD.
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

GRIFFITH, JOHN F
1738 GOLF WINDS COURT
APOPKA, FL 32712 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 GRIFFITH 07/09/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: GRIFFITH, JOHN F
Address: 985 SADDLEBACK RIDGE RD.
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GRIFFITH, JOHN F
Address: 1738 GOLF WINDS COURT
City-St-Zip: APOPKA, FL 32712

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 GRIFFITH MRG 07/09/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date