

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2008 08:00 A
Secretary of State


DOCUMENT # L06000051745
 1. Entity Name
DIABLO INVESTMENTS, LLC



Principal Place of Business
**107 HAMPTON ROAD STE 190
 CLEARWATER, FL 33759**

Mailing Address
**107 HAMPTON ROAD STE 190
 CLEARWATER, FL 33759**

DO NOT WRITE IN THIS SPACE



02072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 06-1778665	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**HINES, BRAD
 100 SECOND AVE SOUTH
 STE 301N
 SAINT PETERSBURG, FL 33701**

DO NOT WRITE 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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when re-registering) DATE

**FILE NOW!!! FEE IS \$138.75
 After May 1, 2008 Fee will be \$538.75**

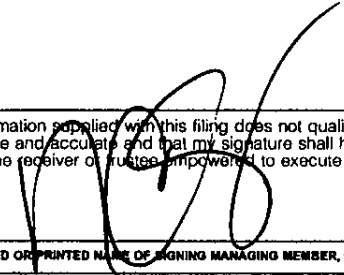
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCHERER, JOHN C 107 HAMPTON ROAD STE 190 CLEARWATER, FL 33759
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 03/18/08-80047-013 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: **02/19/08** _____
Date

Daytime Phone # _____
Daytime Phone #