

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064397

FILED
Apr 05, 2007
Secretary of State

Entity Name: PSYCHODIVER ENTERPRISES LLC

Current Principal Place of Business:

5184 EL CLARO CIR.
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

5184 EL CLARO CIR.
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 72-1618468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPRINGER, RICHARD W
3003 SOUTH CONGRESS AVE.
WEST PALM BEACH, FL 33461 US

Name and Address of New Registered Agent:

SPRINGER, RICHARD W
3003 SOUTH CONGRESS AVE.
SUITE 1A
WEST PALM BEACH, FL 33461 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:

04/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MATESI, CATHERINE
Address: 802 NORTHVIEW DRIVE
City-St-Zip: JUPITER, FL 33458

Title: MGRM () Delete
Name: HONACHER, JACK
Address: 5184 EL CLARO AVE.
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AYERS, BETTY G MRS
Address: 511 N.W. 7TH COURT
City-St-Zip: BOYNTON BEACH, FL 33426

Title: MGRM (X) Change () Addition
Name: HONACHER, JACK W MR
Address: 5184 EL CLARO CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33415

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: JACK W. HONACHER

MR.

04/05/2007

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