2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# L06000102949

Entity Name: DIVERSIFIED INVESTIGATORS, LLC

Current Principal Place of Business:

374 S. ATLANTIC AVE.
ORMOND BEACH, FL 327164153

New Principal Place of Business:

Current Mailing Address:

C/O EUGENE SMILEY
P.O. BOX 10582
DAYTONA BEACH, FL 32120

New Mailing Address:

FEI Number: 20-5888092 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TURNER-HAHN, CARLA ESQ.
4701 CENTRAL AVENUE, SUITE A
ST. PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	SMILEY, EUGENE	
Address:	P.O. BOX 10582	
City-St-Zip:	DAYTONA BEACH, FL 33220	
Title:	MGRM	( ) Delete
Name:	TURNER-HAHN, CARLA ESQ.	
Address:	4701 CENTRAL AVE., SUITE A	
City-St-Zip:	ST. PETERSBURG, FL 33713	

ADDITIONS/CHANGES:

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: EUGENE SMILEY MGRM 01/04/2007

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