2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102699

Entity Name: DIVERSIFIED HOLDING PARTNERS, LLC

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6220 S. ORANGE BLOSSOM TRAIL SUITE 601 ORLANDO, FL 32809 **New Mailing Address: Current Mailing Address:** 6220 S. ORANGE BLOSSOM TRAIL SUITE 601 ORLANDO, FL 32809 FFI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: PERLA, HENRY L 23 E. LÍVINGSTON STREET ORLANDO, FL, FL 32801 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MARRERO, FRANK Name: Name: 6220 S. ORANGE BLOSSOM TRAIL, STE 601 Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: MGR () Delete Title: () Change () Addition ROBINSON, VINCENT Name: Name: Address: 6220 S. ORANGE BLOSSOM TRAIL, STE 601 Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MINIER, MANUEL Name: Name: 6220 S. ORANGE BLOSSOM TRAIL, STE 601 Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: DIAZ, JIMMIY Name: 6220 S. ORANGE BLOSSOM TRAIL, STE 601 Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: MGR () Delete Title: () Change () Addition SANTOS, CEASAR Name: Name: 6220 S. ORANGE BLOSSOM TRAIL, STE 601 Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: () Delete Title: () Change () Addition NOVOA, ANTONIO Name: Name: Address: 6220 S. ORANGE BLOSSOM TRAIL, STE 601 Address: ORLANDO, FL 32809 City-St-Zip: City-St-Zip:

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: VINCENT M. ROBINSON MRG 05/01/2008