


**2007 LIMITED LIABILITY COMPANY .
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000000640 1. Entity Name DIVERSIFIED INVESTMENT PROPERTIES LLC	
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Principal Place of Business 330 SOUTH STREET, P.O. BOX 1975 MORRISTOWN, NJ 07962-1975	Mailing Address 330 SOUTH STREET, P.O. BOX 1975 MORRISTOWN, NJ 07962-1975
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01242007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-3418351	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 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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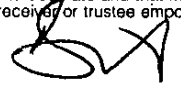
DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOROWSKY, KURT T 330 SOUTH STREET, P.O. BOX 1975 MORRISTOWN, NJ 079621975
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROMANO, ANTHONY J 330 SOUTH STREET, P.O. BOX 1975 MORRISTOWN, NJ 079621975
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROY, DAVID J 330 SOUTH STREET, P.O. BOX 1975 MORRISTOWN, NJ 079621975
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, DONALD R 330 SOUTH STREET, P.O. BOX 1975 MORRISTOWN, NJ 079621975
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000621434 02/12/07-80016-022 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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:  Donald R. Smith, VP <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	1/31/2007 973-290-2330 <small>Date Daytime Phone #</small>
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