2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000071531

Entity Name: E/R DIVERSIFIED, INC.

FILED Apr 26, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

890 NW 86TH AVE 2112 S. CYPRESS BEND DRIVE

915 802

FORT LAUDERDALE, FL 33324 POMPANO BEACH, FL 33069

Current Mailing Address: New Mailing Address:

890 NW 86TH AVE 2112 S. CYPRESS BEND DRIVE 802

FORT LAUDERDALE, FL 33324 POMPANO BEACH, FL 33069

FEI Number: 65-1025413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KESSLER, EVELYN S KESSLER, EVELYN S 16340 S POST RD #104 2112 S. CYPRESS BEND DRIVE WESTON, FL 33331 802

POMPANO BEACH, FL 33069

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: EVELYN S. KESSLER 04/26/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition

Title: KESSLER, EVELYN S KESSLER, EVELYN S Name: Name: 890 NW 86TH AVE. STE 915 2112 CYPRESS BEND DRIVE Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: POMPANO BEACH, FL 33069

() Delete VΡ Title: VΡ (X) Change () Addition Title:

Name: BOLINGER, RONALD D Name: BOLINGER, RONALD D 890 NW 86TH AVE. STE. 915 2112 CYPRESS BEND DRIVE Address: Address: PLANTATION, FL 33324 POMPANO BEACH, FL 33069 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: RONALD D. BOLINGER 04/26/2004