

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117711

FILED
Jul 04, 2006
Secretary of State

Entity Name: DIVERSIFIED CONSULTING CONCEPTS, INC.

Current Principal Place of Business:

4719 NW 18TH PLACE
GAINESVILLE, FL 32605

New Principal Place of Business:

1340 NW 25TH TERRACE
GAINESVILLE, FL 32605

Current Mailing Address:

4719 NW 18TH PLACE
GAINESVILLE, FL 32605

New Mailing Address:

1340 NW 25TH TERRACE
GAINESVILLE, FL 32605

FEI Number: 65-1207408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, CAIN
4719 NW 18TH PLACE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

DAVIS, CAIN
1340 NW 25TH TERRACE
GAINESVILLE, FL 32605 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: CAIN DAVIS

07/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DAVIS, CAIN
Address: 4719 NW 18TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

Title: VPS () Delete
Name: DAVIS, SHIRLEY B
Address: 4719 NW 18TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DAVIS, CAIN
Address: 1340 NW 25TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: VPS (X) Change () Addition
Name: DAVIS, SHIRLEY B
Address: 1340 NW 25TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

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 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.

SIGNATURE: CAIN DAVIS

PTD

07/04/2006

Electronic Signature of Signing Officer or Director

Date