

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164710

Entity Name: MS DIVERSIFIED, INC.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

7678 SE BAY CEDAR CIRCLE  
HOBE SOUND, FL 33455 US

## New Principal Place of Business:

## Current Mailing Address:

7678 SE BAY CEDAR CIRCLE  
HOBE SOUND, FL 33455 US

## New Mailing Address:

FEI Number: 20-1972746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVY, STEPHEN  
100 VILLAGE SQUARE CROSSING  
ST 103  
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RIECKS, DEBORAH  
Address: 6930 WILSON ROAD  
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: VP ( ) Delete  
Name: HICKEY, MARGARET  
Address: 7678 SE BAY CEDAR CIRCLE  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: SEC ( ) Delete  
Name: HICKEY, MARGARET  
Address: 7678 SE BAY CEDAR CIRCLE  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: TREA ( ) Delete  
Name: RIECKS, DEBORAH  
Address: 6930 WILSON ROAD  
City-St-Zip: WEST PALM BEACH, FL 33455 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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.

SIGNATURE: MARGARET HICKEY

VP

04/29/2005

Electronic Signature of Signing Officer or Director

Date