## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144317

Entity Name: LJM DIVERSIFIED GROUP, INC.

FILED Mar 18, 2008 Secretary of State

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

717 S.W. MYAKKA RIVER TRACE PORT SAINT LUCIE, FL 33323

Current Mailing Address: New Mailing Address:

717 S.W. MYAKKA RIVER TRACE PORT SAINT LUCIE, FL 33323

FEI Number: 20-4366323 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:

ADAMES, LINDA
717 S.W. MYAKKA RIVER TRACE
PORT SAINT LUCIE, FL 33323 US

MCCAIG, JAMES
717 S.W. MYAKKA RIVER TRACE
PORT SAINT LUCIE, FL 33323 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: JAMES MCCAIG 03/18/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: ADAMES, LINDA Name: MCCAIG, JAMES

Address: 717 S.W. MYAKKA RIVER TRACE Address: 717 S.W. MYAKKA RIVER TRACE
City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip: PORT SAINT LUCIE, FL 34986

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 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: JAMES MCCAIG PRES 03/18/2008