

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000156613

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Entity Name:** DIVERSIFIED EXPOSURE INC.

**Current Principal Place of Business:**

101 WYMORE RD  
STE 200  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

101 WYMORE RD  
STE 200  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 20-3849627

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARKER, SHELBI S  
124 W LAUREN CT  
FERN PARK, FL 32730 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

**OFFICERS AND DIRECTORS:**

**Title:** CEO  
**Name:** BLOSS, STEPHEN P  
**Address:** 15003 NE 102ND ST  
**City-St-Zip:** VANCOUVER, WA 98682 US

**Title:** CFO  
**Name:** PARKER, SHELBI S  
**Address:** 124 WEST LAUREN CT.  
**City-St-Zip:** FERN PARK, FL 32730

I hereby 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 all other like empowered.

SIGNATURE: SHELBI S PARKER

CFO

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date