2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000098684

Entity Name: SPENCER DIVERSIFIED ENTERPRISES, INC.

FILED Mar 05, 2009 Secretary of State

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

474 N. HARBOUR CITY BOULEVARD #1 152 N. HARBOUR CITY BOULEVARD #100

PALM BAY, FL 32910 PALM BAY, FL 32910

Current Mailing Address: New Mailing Address:

PO BOX 100987 PALM BAY, FL 32910

FEI Number: 80-0295408 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:

SPENCER, ANTHONY G

SPENCER, ANTHONY G

452 N. LIABBOUR CITY POLIT EVARS

474 N. HARBOUR CITY BOULEVARD #1 152 N. HARBOUR CITY BOULEVARD #100 PALM BAY, FL 32910 US MELBOURNE, FL 32935 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: ANTHONY G. SPENCER 03/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: SPENCER, ANTHONY G Name: SPENCER, ANTHONY G

Address: 474 N. HARBOUR CITY BOULEVARD #1 Address: 152 N. HARBOUR CITY BOULEVARD #100

City-St-Zip: PALM BAY, FL 32910 City-St-Zip: MELBOURNE, FL 32935

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: ANTHONY G SPENCER PRES 03/05/2009

Electronic Signature of Signing Officer or Director

Date