## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000081899

Entity Name: DIVERSITY THERAPY SERVICES INC.

FILED Apr 30, 2012 Secretary of State

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

2780 EAST FOWLER AVENUE 2780 EAST FOWLER AVENUE TAMPA, FL 33612

405

TAMPA, FL 33612

**Current Mailing Address: New Mailing Address:** 

2780 EAST FOWLER AVENUE 2780 EAST FOWLER AVENUE

TAMPA, FL 33612 TAMPA, FL 33612

FEI Number: 43-3366807 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GEBRESLASSIE, LISA GEBRESLASSIE, LISA 2780 EAST FOWLER AVENUE 2780 EAST FOWLER AVENUE TAMPA, FL 33612

TAMPA, FL 33612 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: LISA GEBRESLASSIE 04/30/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

GEBRESLASSIE, LISA Name: 2780 EAST FOWLER AVENUE Address:

City-St-Zip: TAMPA, FL 33612

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: LISA GEBRESLASSIE D 04/30/2012