2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000021089

1. Entity Name

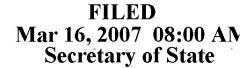
DIVERSIFIED SUPPORT SERVICES, INC.



Principal Place of Business

7504 SE MARSH FERN LANE HOBE SOUND, FL 33455 US Mailing Address

7504 SE MARSH FERN LANE HOBE SOUND, FL 33455





03132007

No Chg-P

CR2E034 (11/05)

4.	FEI Number
	65-0470810

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empower

LOONEY, TIMOTHY J 7504 SE MARSH FERN LANE HOBE SOUND, FL 33455

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SIGNATURE						
	E NOW!!! FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing \$5.00 May Be Added to Fees			
10. IITLE NAME STREET ADDRESS CITY-ST-ZP	OFFICERS AND DIRECT PSTD LOONEY, TIMOTHY J 7504 SE MARSH FERN LANE	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOBE SOUND, FL 33455			000000567886 33/27/07-80008-001 (50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE		
ntle Name Street address City-St-Zip				THIS SPACE		
NAME NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby of indicated of the cor	certify that the information supplied with this for on this report or supplemental report is true poration or the receiver of trustee empowers	iling does not qualify for the exe and accurate and that my signat d to execute this report as requir	emptions contained in Chapter 11: ture shall have the same legal effected by Chapter 607, Florida Statute	9, Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director es, and that my name appears in Block 10 or Block 11 if		