2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000058992

Entity Name: DIVERSIFIED ELECTRICAL SYSTEMS, INC.

FILED Jul 30, 2009 Secretary of State

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

1286 SW 34TH STREET 4283 SW HIGH MEADOW AVE. PALM CITY, FL 34990 US PALM CITY, FL 34990 US

Current Mailing Address: New Mailing Address:

1286 SW 34TH STREET 4283 SW HIGH MEADOW AVE. PALM CITY, FL 34990 US PALM CITY, FL 34990 US

FEI Number: 65-0681453 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:

HEARD, D W
1286 SW 34TH ST
4207 SW HIGH MEADOW AVE.
PALM CITY, FL 34990 US
PALM CITY, FL 34990 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: WILLIAM C MCINTYRE 07/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:HEARD, DONALD WName:BRYAN, MICHAELAddress:1286 SW 34TH STREETAddress:4241 SW HIGH MEADOW AVE.

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990

Title: S () Delete Title: STD (X) Change () Addition Name: CONNELL, J Name: ECCLESTON, SCOTT

 Address:
 1286 SW 34TH ST
 Address:
 4241 SW HIGH MEADOW AVE.

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 PALM CITY, FL 34990

 Name:
 HEARD, D
 Name:
 WEHLE, JOHN

 Address:
 1286 SW 34TH ST
 Address:
 4241 SW HIGH MEADOW AVE.

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990

Title: VP () Delete Title: VP (X) Change () Addition Name: RILEY, MICHAEL F Name: HEARD, DONALD

Address: 9526 150TH COURT NORTH Address: 4283 SW HIGH MEADOW AVE City-St-Zip: JUPITER, FL 33478 City-St-Zip: PALM CITY, FL 34990

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: SCOTT ECCLESTON DST 07/30/2009