## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: DIVERSIFIED MANAGEMENT & CONSTRUCTION, INC.

## DOCUMENT# P97000055518

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3629 WASHINTON RD 3629 WASHINGTON RD VALRICO, FL 33594 VALRICO, FL 33594 **Current Mailing Address: New Mailing Address:** PO BOX 6679 SEFFNER, FL 33583 FEI Number: 59-3453651 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: BARTLETT, SCOTT J 12925 JESS WALDEN ROAD DOVER, FL 33527 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPST ( ) Delete Title: () Change () Addition Name: BARTLETT, ANGELA M Name: 12925 JESS WALDEN ROAD Address: Address: City-St-Zip: **DOVER, FL 33527** City-St-Zip: Title: Title: () Delete () Change () Addition Name: BRADSHAW, J. MICHAEL Name: 13214 TIFTON DR Address: Address: TAMPA, FL 33618 City-St-Zip: City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: SCOTT J. BARTLETT VP 04/28/2009

( ) Delete

12925 JESS WALDEN ROAD

BARTLETT, SCOTT J

**DOVER, FL 33527** 

Title:

Name:

Address: City-St-Zip: () Change () Addition