

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000044951

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: DIVERSIFIED SERVICE OPTIONS, INC.

## Current Principal Place of Business:

532 RIVERSIDE AVENUE  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

## Current Mailing Address:

532 RIVERSIDE AVENUE  
JACKSONVILLE, FL 32202

## New Mailing Address:

FEI Number: 59-3514333

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUNGERMAN, ANDREW J IV  
4800 DEERWOOD CAMPUS PARKWAY  
100-7  
JACKSONVILLE, FL 32246 US

## Name and Address of New Registered Agent:

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:

Title: C ( ) Delete  
Name: GRANTHAM, L JOSEPH  
Address: 4800 DEERWOOD CAMPUS PKWY 100-8  
City-St-Zip: JACKSONVILLE, FL 32246

Title: SGC ( ) Delete  
Name: HUNGERMAN, ANDREW J IV  
Address: 4800 DEERWOOD CAMPUS PKWY 100-7  
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete  
Name: DOERR, R CHRIS  
Address: 4800 DEERWOOD CAMPUS PKWY 100-8  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DPCE ( ) Delete  
Name: LORD, CURTIS W  
Address: 532 RIVERSIDE AVENUE 20T  
City-St-Zip: JACKSONVILLE, FL 32202

Title: AS ( ) Delete  
Name: JOLLY, AREZOU C  
Address: 4800 DEERWOOD CAPUS PARKWAY 100-7  
City-St-Zip: JACKSONVILLE, FL 32246

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: T ( ) Change (X) Addition  
Name: DAVIS, MICHAEL  
Address: 532 RIVERSIDE AVENUE, 16T  
City-St-Zip: JACKSONVILLE, FL 32202

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: ANDREW J. HUNGERMAN

S

04/28/2009

Electronic Signature of Signing Officer or Director

Date