


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2005 8:00 am**  
**Secretary of State**

05-05-2005 90091 004 \*\*\*150.00

<b>DOCUMENT # F01000004872</b> 1. Entity Name <b>UNITED TELEMAGEMENT SYSTEMS, INC.</b>					
Principal Place of Business <b>6450 POE AVE STE 401 DAYTON, OH 45414</b>			Mailing Address <b>6450 POE AVE STE 401 DAYTON, OH 45414</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	05022005    Chg-P    CR2E034 (10/03)	
4. FEI Number <b>31-1760874</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324</b>			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCD CAMPBELL, DONALD E 4162-G LITTLE YORK ROAD DAYTON, OH 454145818</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>See attached list for additions</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD HENLEY, TERRY 4162-G LITTLE YORK ROAD DAYTON, OH 454145818</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD BROOKS, BARRY D 4162-G LITTLE YORK ROAD DAYTON, OH 454145818</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D JACOBS, M.D., ALAN K 7077 MECKER COMMONS LANE DAYTON, OH 45414</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D OREM, D.O., RANDALL C 7677 WINDING WAY NORTH TIPP CITY, OH 45371</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D WESTERVELT, ROBERT 50 NICKLERAIN CT. MONTVALE, NJ 07645</b>	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>PEBBY ISAACS</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			5-2-05    937-454-1888 <small>Date    Daytime Phone #</small>		

## ATTACHMENT

40082897

# F61000004872

United Telemanagement Corporation  
 Officers/Directors/Shareholders  
 12/31/2004

## Officer

Title Director Name Address

President	Yes	Campbell, Don	1485 Country Wood Dr. Dayton, Oh 45440
CEO	Yes	Henley, Terry	278 N. Children's Home Rd. Troy, Oh 45373
Treasurer	Yes	Brooks, Barry	3523 Brookwood Meadows Cincinnati, Oh 45208
	Yes	Jacobs, Alan M.D.	7077 Meeker Commons Lane, Dayton, Oh 45414
	Yes	Orem, Randall D.O.	7677 Winding Way North Tipp City, Oh 45371
	Yes	Westervelt, Robert	50 Nickelrain Ct Montvale, Nj 07645
	Yes	Balmer, Rowe	3515 Pine Grove Suite 203 Port Huron, Mich 48060
Secretary	Yes	Isaacs, Peggy	6450 Poe Ave Suite 401 Dayton, Oh 45414
	Yes	Gulledge, Robert	113 Weatherbourne Dr. Roswell, Ga 30076
	Yes	Moore, William	7800 Cooper Rd Suite 104 Cincinnati, Oh 45242