2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010141

FILED Apr 30, 2012 Secretary of State

Entity Name: DMS CONSULTANTS & ENTERTAINMENT, INC.

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

12 N.E. 1ST STREET 1 BAD KUT OCALA, FL 34470

Current Mailing Address: New Mailing Address:

6455 S.W. 103RD STREET ROAD 12 N.E. 1ST STREET OCALA, FL 34476 1 BAD KUT OCALA, FL 34470

FEI Number: 80-0662465 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:

SHAW, S. CHANTILE MAVMHC/ 6455 S.W. 103RD STREET ROAD OCALA, FL 34476 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: MACK, PAMELA Address: 2524 OLIVE ROAD City-St-Zip: OCALA, FL 34472

Title: VP

Name: GRANT, EDITH

Address: 6201 103RD STREET ROAD

City-St-Zip: OCALA, FL 34476

Title:

Name: NEWMAN, KARYN
Address: 2600 SOTH STREET
City-St-Zip: LEESBURG, FL 34748

Title: 5

Name: HOOKFIN, UNIQUE

Address: 6455 S.W. 103RD STREET ROAD

City-St-Zip: OCALA, FL 34476

Title: CEO

Name: SHAW, S. CHANTILE Address: 6455 S.W. 103RD STREET RD

City-St-Zip: OCALA, FL 34476

Title: EX.D

Name: JOHNSON, DERON ASST.

Address: 6 OLIVE LANE City-St-Zip: OCALA, FL 34472

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: S. CHANTILE SHAW CEO 04/30/2012