

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000088364

FILED
Jan 26, 2005
Secretary of State

Entity Name: NUCLEAR MEDICINE CONSULTANTS, INC.

Current Principal Place of Business:

835 SOUTH OSPREY AVENUE
UNIT 404
SARASOTA, FL 34236

New Principal Place of Business:

1580 HILLVIEW DR.
SARASOTA, FL 34239

Current Mailing Address:

835 SOUTH OSPREY AVENUE
UNIT 404
SARASOTA, FL 34236

New Mailing Address:

1580 HILLVIEW DR.
SARASOTA, FL 34239

FEI Number: 65-1041249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PREWETT, DANIEL L
5777 BENEVA ROAD SOUTH
SARASOTA, FL 34233 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: D () Delete
Name: STAFFORD, LYNN K
Address: 835 SOUTH OSPREY AVENUE UNIT 404
City-St-Zip: SARASOTA, FL 34236

Title: PVST () Delete
Name: STAFFORD, LYNN K
Address: 835 SOUTH OSPREY AVENUE UNIT 404
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: YAMADA, LYNN S
Address: 1580 HILLVIEW DR.
City-St-Zip: SARASOTA, FL 34239

Title: PVST (X) Change () Addition
Name: YAMADA, LYNN S
Address: 835 SOUTH OSPREY AVENUE UNIT 404
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LYNN S. YAMADA

PRES

01/26/2005

Electronic Signature of Signing Officer or Director

Date