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**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # PO2000-122175	
1. Entity Name Comdent, Inc.	

FILED
03 OCT 21 PM 5:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10/21/03--01093--007 **150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 6399 142nd Avenue N		3. Mailing Address 111 2nd Ave NE	
Suite, Apt. #, etc. Suite 112		Suite, Apt. #, etc. Suite 1109	
City & State Clearwater FL		City & State St. Petersburg, FL	
Zip 33760	Country USA	Zip 33701	Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 74-3071205		Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
	7. Name and Address of Current Registered Agent			
	Name Sallie T. Bussey			
Street Address (P.O. Box Number is Not Acceptable) 111 2nd Ave NE				
Suite Suite 1109				
City St. Petersburg				
FL Zip Code 33701				

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 <i>Sallie T. Bussey</i>	DATE 9-15-03

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Peter E. Dawson - President ONE BEACH DRIVE SE #1106 St Petersburg FL 33701	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Robert A. Jackson 6399 142nd Ave N, Suite 112 Clearwater, FL 33760	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary & Treasurer Sallie T. Bussey 111 2nd Ave NE Suite 1109 St. Petersburg FL 33701	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NOT A STATEMENT 03	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowerment.	
SIGNATURE: <i>Sallie T. Bussey</i>	DATE 9-15-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
Daytime Phone # (727) 823-7047	

CR2E034B (12/02)

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COMDENT, INC.

Robert A. Jackson, President
6399 142nd Avenue, North
Suite #112
Clearwater, FL 33762-2728

LOCAL: 727-524-2440
TOLL-FREE: 877-524-2440
FAX: 727-535-8376

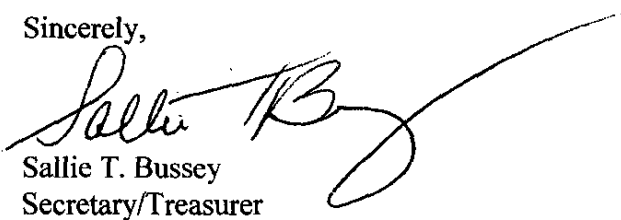
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sirs:

Please find attached the UBR for Comdent, Inc. and a check for \$150.00. This is my request that you waive the late penalty due to the fact that we never received in the mail the annual report request. It was not until we tried to pay sales tax did we realize that we had not received the UBR.

Thank you for your consideration in this matter.

Sincerely,



Sallie T. Bussey
Secretary/Treasurer