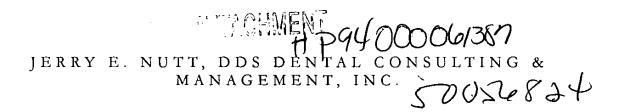
2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

FILED Jul 21, 2005 8:00 am Secretary of State 07-21-2005 90032 027 ***150.00

| DOCUMENT # P9400061387 1. Entity Name JERRY E. NUTT, D.D.S., DENTAL CONSULTING & MANAGEMENT, INC. | | | | | | | 07-21-2005 | 5 90032 02 | :7 ***1: | 50.00 |
|--|-----------------|--------------------------------------|--|----------------|--|---|--------------------------|-------------------|------------------------|---------------------------|
| Principal Place | e of Busines | s | Mailing Address | | | 7 | | | | |
| 217 MAIN ST | | - | 217 MAIN STREET | | | | | _ | | |
| DESTIN, FL 32541 US | | | DESTIN, FL 32541 US | | | | | 5 | 105£ | 824 |
| | | | | | | 1 (20)1001 (10 | iorii etom ezin bern oek | | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 06282005 | Chg-P | CR2E034 | (10/03) | |
| City & State | | | City & State | | | 4. FEI Numbe 59-3264 | | | | plied For t Applicable |
| Zip | | Country | Zip | Coun | try | 5. Certificate | of Status Desired | □ \$8 Fe | 3.75 Add e Required | litional d |
| | 6. Name | and Address of Current | | | | 7. Name and Address of New Registered Agent | | | | |
| KAIGHEN, PAMELA J | | | | | Name Jerry E. NUTT, DDS | | | | | |
| 217 MAIN DESTIN. F | STREET | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| DESTIN, F | L 32341 | | | 217 | | | reet | | | |
| | | | | | | City Zip Code | | | | |
| 8. The above | named entit | v submits this statement fo | Desti ed office or registe | | h, in the State of Flo | | 325 | | | |
| 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 | | | | | | | | | | |
| | | | | | | | | | | |
| | | ! FEE IS \$550.00 otember 7, 2005 | 9. Election Campa Trust Fund Con | | | 5.00 May Be ded to Fees | | | | |
| 10. | | OFFICERS AND | DIRECTORS | 11. | | ADDITIONS/ | CHANGES TO OFF | ICERS AND D | RECTORS | S IN 11 |
| TITLE | D | ODV E | Delete | | | | | | Change | Addition |
| NAME STREET ADDRESS | NUTT, JE | SHORE DRIVE | | NAM STRE | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | FL 32541 | | | -ST-ZIP | | | | | |
| TITLE | | | ☐ Delete | TITLE | | | | | Change | ☐ Addition |
| NAME | | | | NAM | E | | | | • | _ |
| STREET ADDRESS | | | | | ET AODRESS | | | | | |
| CITY-ST-ZIP | ļ | | | - ł | -ST-ZIP | | | <u>-</u> | | |
| TITLE NAME | | | ☐ Delete | TITLE | | | | | Change | ☐ Addition |
| STREET ADDRESS | | / | | 1. | ET ADDRESS | | | | | |
| C!TY-ST-ZIP | | | | CITY | -ST-ZIP | | | | | |
| TITLE | | | ☐ Delete | TITLE | E | | | | Change | Addition |
| NAME | | | | NAM | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | ļ | | | | ET ADDRESS - ST-ZIP | | | | | |
| TITLE | - | | ☐ Delete | TIPL | | | | | Change | Addition |
| NAME | | | La Delete | NAM | | | | L | _ onongo | |
| STREET ADDRESS | | | | | ET ADDRESS | | | | | |
| CITY-ST-ZIP | ļ | | | _ | -SI-ZIP | | | | | |
| TITLE | | | ☐ Đelete | THILE | | | | |] Change | Addition |
| NAME STREET ADDRESS | | | | NAM STRE | ET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | - ST-ZIP | | | | | |
| 12. I hereby o | certify that th | e information supplied with | n this filing does not qualify for strue and accurate and that | the exe | mption stated in S | Section 119.07(3)(|), Florida Statutes, I | I further certify | that the in | nformation or director |
| of the cor | rporation or t | he receiver or trustee emp | owered to execute this repor with all other like empowered | t as requi | red by Chapter 60 | 7, Florida Statute | s; and that my name | e appears in B | lock 10 or | Block 11 if |



June 28, 2005

Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

To Whom it May Concern:

Please accept this letter as a formal request to have the late fee of \$400.00 waived for the filing of the annual report for Jerry E. Nutt, DDS Dental Consulting & Management, Inc.

The office that handles all of the paperwork for Jerry E. Nutt, DDS Dental Consulting & Management, Inc. experienced a turnover earlier in the year. Unfortunately, the notice to file the annual report had been filed in a former employee's desk and only recently recovered once we received the Notice of Intent to Dissolve.

I spoke with Cathy, an examiner, at the Florida Department of State, Division of Corporations on June 28, 2005, and she advised payment of \$150.00. If you find this to be unacceptable, please notify me at your earliest convenience, and the late fee payment of \$400.00 will be made promptly.

Thank you in advance for your consideration in this matter.

Sincerely,

Jennifer Moffatt Assistant Controller