

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000022621

Entity Name: DMD MANAGEMENT CO.

FILED
Feb 12, 2008
Secretary of State

Current Principal Place of Business:

119 LEPORT DRIVE
PENSACOLA, FL 32561

New Principal Place of Business:

6601 N DAVIS HWY
8
PENSACOLA, FL 32504

Current Mailing Address:

6601 N DAVIS HWY
SUITE 8
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-3562913 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRUGIA, VINCENT J
2495 BELLE CHRISTIANE
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

CARTWRIGHT, LEANNE
6601 N DAVIS HWY
8
PENSACOLA, FL 32504 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: LEANNE CARTWRIGHT

02/12/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LAMBERT, CAROL
Address: 1633 KINSAGLE DR
City-St-Zip: CANTONMENT, FL 32533

Title: VP (X) Delete
Name: FARRUGIA, ALAN
Address: 2495 BELLE CHRISTIANE
City-St-Zip: PENSACOLA, FL 32503

Title: S (X) Delete
Name: FARRUGIA, VINCE
Address: 2495 BELLE CHRISTIANE
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FARRUGIA, ALAN
Address: 6601 N DAVIS HWY STE 8
City-St-Zip: PENSACOLA, FL 32504

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ALAN FARRUGIA

P

02/12/2008

Electronic Signature of Signing Officer or Director

Date