


FILED  
Aug 26, 2005 8:00 am  
Secretary of State

07-13-2005 90013 009 \*\*\*150.00

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # 549321			
1. Entity Name MAJORIE K. SAGER, INC.			
Principal Place of Business 221 W. MIAMI AVENUE VENICE, FL 34285-2302		Mailing Address 221 W. MIAMI AVENUE VENICE, FL 34285-2302	
2. Principal Place of Business 929 Inlet Circle		3. Mailing Address P.O. Box 1926	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Venice FL		City & State Venice FL	
Zip 34285	Country USA	Zip 34284	Country USA
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		4. FEI Number 59-1776096	
Applied For		Not Applicable	
6. Name and Address of Current Registered Agent SAGER, MARJORIE K. 221 W. MIAMI AVENUE VENICE, FL 33595		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 929 Inlet Circle City Venice FL Zip Code 34285	
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 _____ (NOTE: Registered Agent signature required when mandating) DATE _____			
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SAGER, MARJORIE K. 221 W. MIAMI AVENUE VENICE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 929 Inlet Circle Venice FL 34285
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Marjorie K. Sager</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		7/8/05 941 485 3393 Date Daytime Phone #	

ATTACHMENT  
#549307  
PEACOCK & COMPANY, P.A.  
ATTACHMENT  
CERTIFIED PUBLIC ACCOUNTANTS  
133 SOUTH HARBOR DRIVE  
VENICE, FLORIDA 34285

66026520

Thomas J. Peacock, Jr., C.P.A.  
Susan C. Hanks, C.P.A.  
Frank Ray Peacock, C.P.A.

PLEASE REPLY TO:  
P.O. BOX 1804  
VENICE, FLORIDA 34284-1804  
TEL: 941-488-7794  
FAX: 941-488-1718

August 23, 2005

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

Re: Marjorie K. Sager, Inc.

To Whom It May Concern:

Please accept this annual report for the \$150 fee already submitted. The above referenced taxpayer did not receive the original notification. As soon as she received the letter indicating the report was delinquent the situation was remedied immediately. The prior record of this corporation is proof of this usual good standing. Please abate the additional fee normally charged after May 1<sup>st</sup>.

Sincerely,

Approved by:

*Susan C. Hanks*

Susan C. Hanks  
Certified Public Accountant

*Marjorie K. Sager*

Marjorie K. Sager  
President/Shareholder

ATTACHMENT

**PEACOCK & COMPANY, P.A.**  
**CERTIFIED PUBLIC ACCOUNTANTS**  
133 SOUTH HARBOR DRIVE  
VENICE, FLORIDA 34285

H 549321

66126520

Thomas J. Peacock, Jr., C.P.A.  
Susan C. Hanks, C.P.A.  
Frank Ray Peacock, C.P.A.

PLEASE REPLY TO:  
P.O. BOX 1804  
VENICE, FLORIDA 34284-1804  
TEL: 941-488-7794  
FAX: 941-488-1718

July 7, 2005

Division Of corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Marjorie K. Sager, Inc.

To Whom It May Concern:

Please find enclosed the 2005 For Profit Corporation Annual Report for the above referenced entity. A check in the amount of \$150 is also attached.

The sole shareholder of this corporation has been ill and hospitalized several times during the first part of this year. This has caused a disruption in her ability to remain attentive to some of the administrative details of her corporation. Her illness, along with the change of notification to postcards this year, has caused her to miss the filing deadline for this registration.

You will note that this corporation has always been compliant and an entity in good standing with the State of Florida. In light of this unusual situation and the positive record, please consider abatement of the additional fee normally charged after May 1<sup>st</sup>.

Thank you for your consideration.

Sincerely,

Approved by:

*Susan C. Hanks*

Susan C. Hanks  
Certified Public Accountant

*Marjorie K. Sager*  
Marjorie K. Sager  
President/Shareholder

Enc. (2)