## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 849522**

Entity Name: SAGER FUND, INC.

FILED Jul 31, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
19 LEONA MIDDLEB	ADRIVE OROUGH, MA 02346			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
19 LEONA MIDDLEB	ADRIVE OROUGH, MA 02346			
FEI Number	: 04-1800700 FEI Number Applied For	( ) FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of Current Registered Ag	ent: Name and Address of	New Registered Agent:	
	III, RAYMOND P DENT WAY FL 33963 US			
	e named entity submits this statement f e of Florida.	or the purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Register	red Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribution (	( ).		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PT ( ) Delete NORTON, JONATHAN E., 27 BEL AIR ROAD HINGHAM, MA 02043	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete NORTON III, RAYMOND, P. 382 FALMOUTH WOOD ROAD EAST FALMOUTH, MA 02536	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	C ( ) Delete DROHAN, DAVID H., 175 DERBY ST. HINGHAM, MA 02043	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: Citv-St-Zip:	D ( ) Delete YULE, LEE N., 6020 PELICAN BAY BLVD. APT 204 NAPLES. FL 34108	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	

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: NORTON, JONATHAN E. PT 07/31/2008