

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J80574

FILED  
Jul 21, 2008  
Secretary of State

Entity Name: SARA L. STERLING PSY. D., P.A.

## Current Principal Place of Business:

16017 N FLORIDA AVE  
STE 117  
LUTZ, FL 33549 US

## New Principal Place of Business:

14502 N. DALE MABRY HWY  
STE 200  
TAMPA, FL 33618 US

## Current Mailing Address:

16017 N FLORIDA AVE  
STE 117  
LUTZ, FL 33549 US

## New Mailing Address:

14502 N. DALE MABRY HWY  
STE 200  
TAMPA, FL 33618 US

FEI Number: 59-2819626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STERLING, SARA PSY. D., P.A.  
16017 N FLORIDA AVE  
STE 117  
LUTZ, FL 33549 US

## Name and Address of New Registered Agent:

STERLING, SARA PSY. D., P.A.  
14502 N. DALE MABRY HWY  
STE, 200  
TAMPA, FL 33618 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:

07/21/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STERLING, SARA L.,  
Address: 16017 N FLORIDA AVE SUITE 117  
City-St-Zip: LUTZ, FL 33549

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: STERLING, SARA L.,  
Address: 14502 N. DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33618

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: SARA STERLING

DR

07/21/2008

Electronic Signature of Signing Officer or Director

Date