

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000041913

FILED
Sep 01, 2004
Secretary of State

Entity Name: LORI SAWYER-LYONS, PSY.D., P.A.

Current Principal Place of Business:

6221 APPALOOSE TRAIL
FORT LAUDERDALE, FL 33330

New Principal Place of Business:

6221 APPALOOSA TRAIL
FORT LAUDERDALE, FL 33330

Current Mailing Address:

6221 APPALOOSE TRAIL
FORT LAUDERDALE, FL 33330

New Mailing Address:

6221 APPALOOSA TRAIL
FORT LAUDERDALE, FL 33330

FEI Number: 65-0836417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAWYER-LYONS, LORI
6221 APPALOOSE TRAIL
FORT LAUDERDALE, FL 33330

Name and Address of New Registered Agent:

SAWYER-LYONS, LORI
6221 APPALOOSA TRAIL
FORT LAUDERDALE, FL 33330

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:

09/01/2004

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: SAWYER-LYONS, LORI
Address: 6221 APPALOOSE TRAIL
City-St-Zip: FORT LAUDERDALE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAWYER-LYONS, LORI
Address: 6221 APPALOOSA TRAIL
City-St-Zip: FORT LAUDERDALE, FL 33330

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LORI SAWYER-LYONS

PD

09/01/2004

Electronic Signature of Signing Officer or Director

Date