

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000121620

**Entity Name:** DR DAVID H. SARGENT INC

**FILED**  
**Jun 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3545 SUTTON HILLS DR., N.  
LAKELAND, FL 338105565 US

**New Principal Place of Business:**

**Current Mailing Address:**

1583 E. SILVER STAR RD., #305  
OCOEE, FL 34761

**New Mailing Address:**

**FEI Number:** 26-0000433

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SARGENT, DAVID H PHD  
2270 GRIFFIN RD  
SUITE 230  
LAKELAND, FL 33810 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: SARGENT, DAVID H PHD  
Address: 807 W. HARBOUR CT  
City-St-Zip: OCOEE, FL 347613118 US

I hereby 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 all other like empowered.

SIGNATURE: DAVID H SARGENT

CEO

06/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date