

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000102229

FILED
Nov 05, 2007
Secretary of State**Entity Name:** JENNIFER M. SAYERS, PHD, P.A.**Current Principal Place of Business:**5815 FRENCH CREEK CT.
ELLENTON, FL 34222**New Principal Place of Business:****Current Mailing Address:**5815 FRENCH CREEK CT.
ELLENTON, FL 34222**New Mailing Address:****FEI Number:** 32-0034318**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SAYERS, JENNIFER M PHD
5815 FRENCH CREEK CT.
ELLENTON, FL 34222 US**Name and Address of New Registered Agent:**SAYERS, ROBERT F
5815 FRENCH CREEK CT.
ELLENTON, FL 34222 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: BY Y. OGURCHIKOVA AS ATTORNEY-IN-FACT

11/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: SAYERS, JENNIFER M PHD
Address: 5815 FRENCH CREEK CT.
City-St-Zip: ELLENTON, FL 34222

Title: VP () Delete
Name: ROBERT, SAYERS F
Address: 5815 FRENCH CREEK CT.
City-St-Zip: ELLENTON, FL 34222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BY Y. OGURCHIKOVA AS ATTORNEY-IN-FACT

VP

11/05/2007

Electronic Signature of Signing Officer or Director

Date