

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000124522

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: LABAGH SPEECH & LANGUAGE SERVICES, INC.

**Current Principal Place of Business:**

3301 SW 34TH STREET  
SUITE 202  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

3301 SW 34TH CIRCLE  
SUITE 202  
OCALA, FL 34474

**New Mailing Address:**

FEI Number: 20-0361499

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LABAGH, JESSICA L  
1420 SE 20TH AVENUE  
OCALA, FL 34471 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LABAGH, JESSICA L  
Address: 1420 SE 20TH AVENUE  
City-St-Zip: OCALA, FL 34471

Title: S ( ) Delete  
Name: LABAGH, AARON J  
Address: 1420 SE 20TH AVENUE  
City-St-Zip: OCALA, FL 34471

**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: JESSICA LABAGH

P

04/30/2007

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

\_\_\_\_\_  
Date