

## **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000129639

Entity Name: SARASOTA LITESCPE, INC.

**FILED**  
**Jun 14, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

766 STONECREST DRIVE  
SARASOTA, FL 34232 US

**New Principal Place of Business:**

**Current Mailing Address:**

766 STONECREST DRIVE  
SARASOTA, FL 34232 US

**New Mailing Address:**

FEI Number: 20-1616525

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIVERTSON, SUSAN  
766 STONECREST DRIVE  
SARASOTA, FL 34232 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: D,P ( ) Delete  
Name: SIVERTSON, KRIS W  
Address: 766 STONECREST DRIVE  
City-St-Zip: SARASOTA, FL 34232 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP ( ) Change (X) Addition  
Name: NELSON, KENNETH  
Address: 1211 56TH AVENUE TR. EAST  
City-St-Zip: BRADENTON, FL 34203 US

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: KRIS W. SIVERTSON

D,P

06/14/2007

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

\_\_\_\_\_  
Date