


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000039063</b>	
1. Entity Name SACHS & DEYOUNG, P.A.	

Principal Place of Business 601 BAYSHORE BLVD STE. 840 TAMPA, FL 33606 US	Mailing Address 601 BAYSHORE BLVD STE. 840 TAMPA, FL 33606 US
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01102006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3188220	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  SACHS, MARC I 601 BAYSHORE BLVD TAMPA, FL 33606
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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SACHS, MARC I 601 BAYSHORE BLVD, STE 840 TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SACHS, MARC I 601 BAYSHORE BLVD, STE 840 TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DEYOUNG, D. TOBYN 601 BAYSHORE BLVD, STE 840 TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOUCKS, KARLYN 601 BAYSHORE BLVD, STE 840 TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other titles empowered.

SIGNATURE: Marc I Sachs 01/13/06 (813) 253-3755  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #