

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000106569

Entity Name: CRAIG SARGENT, INC.

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

313 MID PINES ROAD  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

313 MID PINES ROAD  
LAKE WORTH, FL 33461

**New Mailing Address:**

FEI Number: 65-0883583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SARGENT, WALTER  
313 MID PINES ROAD  
LAKE WORTH, FL 33461 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: PRES  
Name: SARGENT, WALTER C  
Address: 313 MID PINES ROAD  
City-St-Zip: LAKE WORTH, FL 33461

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: WALTER SARGENT

PRES

04/25/2011

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

\_\_\_\_\_  
Date