

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000013308

FILED  
May 04, 2009  
Secretary of State

Entity Name: STEVEN B. SAGER, D.O., F.A.C.O.G., P.A.

## Current Principal Place of Business:

13685 DOCTOR'S WAY  
SUITE 350  
FORT MYERS, FL 33912 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 0238  
LEHIGH ACRES, FL 33970 US

## New Mailing Address:

FEI Number: 65-0894519

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAGER, STEVEN B DR.  
13685 DOCTOR'S WAY  
SUITE 350  
FORT MYERS, FL 33912 US

## Name and Address of New Registered Agent:

HERSH, CRAIG R  
9100 COLLEGE POINTE COURT  
FORT MYERS, FL 33919 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: CRAIG R. HERSH

05/04/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DR ( ) Delete  
Name: SAGER, STEVEN B DO  
Address: 13685 DOCTOR'S WAY, SUITE 350  
City-St-Zip: FORT MYERS, FL 33912

Title: VP ( ) Delete  
Name: SAGER, MICHELLE J  
Address: 13685 DOCTOR'S WAY, SUITE 350  
City-St-Zip: FORT MYERS, FL 33912

## 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: MICHELLE J SAGER

VP

05/04/2009

Electronic Signature of Signing Officer or Director

Date