

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002458

**FILED**  
**Feb 10, 2006**  
**Secretary of State**

**Entity Name:** SFC CONTRACT SERVICES, INC.

**Current Principal Place of Business:**

2299 HIGHWAY 485  
ROBELINE, LA 71469

**New Principal Place of Business:**

**Current Mailing Address:**

2299 HIGHWAY 485  
ROBELINE, LA 71469

**New Mailing Address:**

**FEI Number:** 72-1313455

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

A1A REGISTERED AGENT, INC  
25 S.E. 2ND AVENUE, STE 1036  
MIAMI 33131, FL 33131 US

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

A1A REGISTERED AGENT INC.  
25 S.E. 2ND AVENUE, STE 1036  
MIAMI 33131, FL 33131 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: PAUL SMITH V.P.

02/10/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SKLAR, TERRY  
Address: 168 BAYOU PIERRE CUTOFF RD  
City-St-Zip: NATCHITOCHE, LA 71457

Title: ST ( ) Delete  
Name: SKLAR, LANELLE F  
Address: 168 BAYOU PIERRE CUTOFF RD  
City-St-Zip: NATCHITOCHE, LA 71457

**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 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: LANELLE F. SKLAR

S

02/10/2006

Electronic Signature of Signing Officer or Director

Date