


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 12, 2004 8:00 am**  
**Secretary of State**

07-12-2004 90024 023 \*\*\*550.00

<b>DOCUMENT # F02000001602</b>	
1. Entity Name <b>STERNE AGEE CAPITAL MARKETS, INC.</b>	

Principal Place of Business <b>800 SHADES CREEK PKWY., STE. 580 BIRMINGHAM, AL 35209</b>	Mailing Address <b>813 SHADES CREEK PKWY., STE. 100B BIRMINGHAM, AL 35209</b>
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**54061578**



2. Principal Place of Business <b>800 Shades Creek Parkway</b>	3. Mailing Address <b>800 Shades Creek Parkway</b>
Suite, Apt. #, etc. <b>Suite 700</b>	Suite, Apt. #, etc. <b>Suite 700</b>
City & State <b>Birmingham, AL</b>	City & State <b>Birmingham, AL</b>
Zip <b>35209</b>	Zip <b>35209</b>
Country	Country

01122004 Chg-P CR2E034 (10/03)

4. FEI Number <b>94-3419699</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent	
<b>FERGUSON, DENNIS 980 N. FEDERAL HWY., STE. 108 BOCA RATON, FL 33432</b>	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLBROOK, JAMES S JR 800 SHADES CREEK PKWY., STE. 580 BIRMINGHAM, AL 35209 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO FRANKEL, CHRISTOPHER L 800 SHADES CREEK PKWY., STE. 580 BIRMINGHAM, AL 35209 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WOODHAM, FRANKLIN E 800 SHADES CREEK PKWY., STE. 580 BIRMINGHAM, AL 35209 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D James S. Holbrook, Jr. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 800 Shades Creek Parkway Suite 700 Birmingham, AL 35209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO Christopher L. Frankel <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 800 Shades Creek Parkway Suite 700 Birmingham, AL 35209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Franklin E. Woodham <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 800 Shades Creek Parkway Suite 700 Birmingham, AL 35209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 like empowered.

SIGNATURE: E Eugene Woodham 6/30/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #