## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F02000001602

1. Entity Name

STERNE AGEE CAPITAL MARKETS, INC.



FILED Jul 06, 2005 08:00 AM Secretary of State

Principal Place of Business

800 SHADES CREEK PKWY - SUITE 700 BIRMINGHAM, AL 35209 Mailing Address

800 SHADES CREEK PKWY - SUITE 700 BIRMINGHAM, AL 35209



## DO NOT WRITE IN THIS SPACE

06282005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For 94-3419699 Not Applied For Not Applied For Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

**SIGNATURE:** 

## DO NOT WRITE IN THIS SPACE

the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating)  DATE						
		Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLBROOK, JAMES S JR 800 SHADES CREEK PKWY - SUITE 7 BIRMINGHAM, AL 35209	700			000000371017 07/06/05-80006-003 300.00	
TITLE NAME STREET ADDRESS CITY -ST - ZIP	DCEO FRANKEL, CHRISTOPHER L 800 SHADES CREEK PKWY - SUITE 7 BIRMINGHAM, AL 35209	700	***		e e e e e e e e e e e e e e e e e e e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WOODHAM, FRANKLIN E 800 SHADES CREEK PKWY - SUITE 7 BIRMINGHAM, AL 35209	00		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 ogth; 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.						

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