


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**

03-07-2006 90003 018 \*\*\*150.00

**DOCUMENT # F05000005584**

1. Entity Name  
 THE STRATEGIC FINANCIAL ALLIANCE, INC.



Principal Place of Business  
 1100 ABERNATHY RD, SUITE 400  
 500 NORTH PARK BLDG  
 ATLANTA, GA 30328

Mailing Address  
 1100 ABERNATHY RD, SUITE 400  
 500 NORTH PARK BLDG  
 ATLANTA, GA 30328

**DO NOT WRITE IN THIS SPACE**



02272006 No Chg-P CR2E034 (11/05)

4. FEI Number  
 03-0510324

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUDWIG, CHRIS J  
 10935 SE 177 PLACE, SUITE 407  
 SUMMERFIELD, FL 34491

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and fee, if applicable. (NOTE: registered Agent signature required in re-registering)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WOLL, EDWARD B 1100 ABERNATHY RD, SUITE 400 ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SLOVIN, CLIVE 1100 ABERNATHY RD, SUITE 400 ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOLDSMITH, ARTHUR B 1100 ABERNATHY RD, SUITE 400 ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Ed Woll 3-17-06 678-274-1848  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Chief Compliance Officer

ATTACHMENT

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 The Strategic Financial Alliance <sup>INC.</sup>

66006292

March 17, 2006

Florida Department of State  
Division of Corporations  
P O Box 1500  
Tallahassee, FL 32302-1500

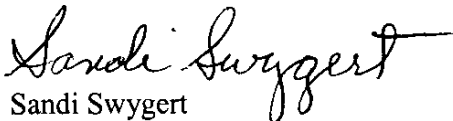
RE: The Strategic Financial Alliance, Inc. ("SFA")  
Reference No.: F05000005584

Dear Sir:

As instructed in your letter of March 8, 2006, Ed Woll, Chief Compliance Officer for SFA, signed the enclosed 2006 For Profit Corporation Annual Report.

Should you require anything further, please do not hesitate to contact Mr. Woll at 678.274.1848 or me at 678.274.1845.

Sincerely,



Sandi Swygert  
Registrations Manager

Enclosure