

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006091

FILED
May 16, 2006
Secretary of State

Entity Name: STERLING RISK ADVISORS, INC.

Current Principal Place of Business:

1640 POWERS FERRY ROAD SE, BUILDING 28
MARIETTA, GA 300671425

New Principal Place of Business:

Current Mailing Address:

1640 POWERS FERRY ROAD SE, BUILDING 28
MARIETTA, GA 300671425

New Mailing Address:

FEI Number: 45-0491669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: RIEDER, DOUGLAS L
Address: 1640 POWERS FERRY ROAD SE, BUILDING 28
City-St-Zip: MARIETTA, GA 300671425

Title: VCS () Delete
Name: MILLER, JOHN BARTLEY
Address: 1640 POWERS FERRY ROAD SE, BUILDING 28
City-St-Zip: MARIETTA, GA 300671425

Title: D () Delete
Name: MILLER, JOHN WILLIAM II
Address: 1640 POWERS FERRY ROAD SE, BUILDING 28
City-St-Zip: MARIETTA, GA 300671425

Title: T () Delete
Name: WILLIAM, JOHN
Address: 1640 POWERS FERRY ROAD SE, BUILDING 28
City-St-Zip: MARIETTA, GA 300671425

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DOUGLAS L RIEDER

CP

05/16/2006

Electronic Signature of Signing Officer or Director

_____ Date