

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90191 025 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F94000005428 1. Entity Name STERLING HOLDINGS, INC.					
Principal Place of Business 65 TECHNOLOGY PKWY ROME, GA 30165			Mailing Address 65 TECHNOLOGY PKWY STE 810 ROME, GA 30165		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 58-1838073	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent Doug Price 1550 Ridge Top Drive Tarpon Springs, FL 34688				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State 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: <u><i>Douglas M Price Vice President</i></u> DATE: <u>4 April 2006</u> <small>Signature, typed or printed name of registered agent and state applicable. (NOTE: Registered Agent signature required when renouncing)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YANCEY, DELOS H 855 OCEAN SHORES BLVD 219 ORMOND BCH, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President-Chairman Yancey, Delos H. 809 Horseleg Creek Road Rome, GA 30165	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Address
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MPT HALE, RODNEY L 218 SAND KEY ESTATES DR CLEARWATER, FL 33767	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Price, Doug 1550 Ridge Top Drive Tarpon Springs, FL 34688	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PHILLIPS, KAREN 3390 RIVERMONT PKWY ALPHARETTA, GA 30022	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Treasurer Elwood Whitacre 121 Sagewood Drive Rome, GA 30165	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLAESER, KARL-HEINZ 4620 BLUE MT DR TUSCON, AZ	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Treasurer Elwood Whitacre 121 Sagewood Drive Rome, GA 30165	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GIL, EDITO M 6921 ARBOR OAKS CT. BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Treasurer Elwood Whitacre 121 Sagewood Drive Rome, GA 30165	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Treasurer Elwood Whitacre 121 Sagewood Drive Rome, GA 30165	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary-Treasurer Elwood Whitacre 121 Sagewood Drive Rome, GA 30165	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u><i>Elwood Whitacre</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date _____ Daytime Phone # _____					