2005 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # F96000006510

1. Entity Name SHERMAN, CLAY & CO.



Principal Place of Business

1111 BAYHILL DRIVE, SUITE 450 SAN BRUNO, CA 94066-3035

Mailing Address

1111 BAYHILL DRIVE, SUITE 450 SAN BRUNO, CA 94066-3035

FILED Jan 19, 2005 8:00 am **Secretary of State**

01-19-2005 90004 017 ***150.00

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DO NOT WRITE IN THIS SPACE

01042005

No Chg-P

CR2E034 (10/03)

4. FEI Number 35-0260400

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

DO NOT WRITE IN THIS COACE

				IIN .	IIII3 SPACE
	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	id office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title is	f applicable. (NOTE: Registered	I Agent signatur	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	٠.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COBD RAVITCH, DONALD N 1111 BAYHILL DRIVE, SUITE 450 SAN BRUNO, CA 940663035				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDOP CONCKLIN, FRED W 1111 BAYHILL DRIVE, SUITE 450 SAN BRUNO, CA 940663035	7			
NAME STREET ADDRESS CITY-ST-ZIP	CEOD SCHWARTZ, ERIC A 1111 BAYHILL DRIVE, SUITE 450 SAN BRUNO, CA 940663035			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO RICHMOND, VICTOR J 1111 BAYHILL DRIVE, SUITE 450 SAN BRUNO, CA 940663035			in	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V AUSTIN, THOMAS G 1111 BAYHILL DRIVE, SUITE 450 SAN BRUNO, CA 940663035				
TITLE NAME STREET ADDRESS	WEHRENS, BILL J				

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 of 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 attackment with an address, with all other like empowered.

SAN BRUNO, CA 940663035

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Victor J. Richmond, 1/4/05

(650)952-2300