2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P02000008536

SADLER HOLDINGS, INC.



FILED Mar 17, 2006 08:00 AM Secretary of State

Principal Place of Business

4669 ROOSEVELT BLVD JACKSONVILLE, FL 32210 Mailing Address

4669 ROOSEVELT BLVD JACKSONVILLE, FL 32210



02242006

No Chg-P

CR2E034 (11/05)

4. FEI Number 80-0031347 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH HULSEY & BUSEY 225 WATER STREET SUITE 1800 JACKSONVILLE, FL 32202

DO NOT WRITE IN THIS SPACE

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	e named entity submits this statement for the pations of registered agent.	urpose of changing its registered offi	C9 Of 1	egistered agent, or bot	th, in the State of Florida.	l am familiar wi	h, and acce
SIGNATURE							
	Signature, typed or printed name of registered agent and title it	repplicable. (NOTE: Registered Agent	รไอูกสเบก	(gnitetenien nerwicken		DATE	
	LE NOW!!! FEE IS \$150.00 Tay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS							
TITLE	P	4				1012	· · · · · · · · · · · · · · · · · · ·
NAME	BUSEY, BROOKS S			1-1 2 - 12 - 12 - 12 - 12 - 12 - 12 - 12	· ·		; _^;_

STREET ADDRESS 4669 ROOSEVELT BLVD. CITY-ST-ZIP JACKSONVILLE, FL 32210 TS TITLE BUSEY, STEPHEN D NAME STREET ADDRESS 4669 ROSSEVELT BLVD. CITY-ST-ZIP JACKSONVILLE, FL 32210 NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

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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: 2

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP