


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**


**FILED**  
**Apr 07, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # P03000085537  
 1. Entity Name  
 SDA CAPITAL, INC.



Principal Place of Business 1200 1ST AVE WEST SUITE 200 BRADENTON, FL 34205	Mailing Address 1200 1ST AVE WEST SUITE 200 BRADENTON, FL 34205
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**DO NOT WRITE IN THIS SPACE**



02082008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0138179	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

PORGES, GREG J  
 1205 MANATEE AVENUE WEST  
 BRADENTON, FL 34205

**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 title if applicable (NOTE: Registered Agent signature required when reissuing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MILLER, HUGH D
STREET ADDRESS	1200 1ST AVE W STE 200
CITY - ST - ZIP	BRADENTON, FL 34205
TITLE	D
NAME	PAGE, GARY R
STREET ADDRESS	2900 RIDGEWOOD CIR NW
CITY - ST - ZIP	ATLANTA, GA 30327
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**

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 04/18/08-80004-010 150.00

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 fee empowered

SIGNATURE:  **2-18-08** **941-748-3433**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #