2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2006
Secretary of State

DOCUMENT# P39540

Entity Name: THE STANLEY-LAMAN GROUP, LTD., INC.

Current Principal Place of Business:

1235 WESTLAKES DR.
SUITE 295
BERWYN, PA 19312

New Principal Place of Business:

Current Mailing Address:

1235 WESTLAKES DR.
SUITE 295
BERWYN, PA 19312

New Mailing Address:

FEI Number: 23-2650538 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 32301 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: PSD ( ) Delete
Name: STANLEY, WILLIAM G.,
Address: 1235 WESLAKES DRIVE, SUITE 295
City-St-Zip: BERWYN, PA

Title: SD ( ) Delete
Name: LAMAN, JAMES J.,
Address: 1235 WESTLAKES DRIVE, SUITE 295
City-St-Zip: BERWYN, PA

Title: VPD ( ) Delete
Name: EATON, DAVID C.,
Address: 1235 WESTLAKES DRIV, SUITE 295
City-St-Zip: BERWYN, PA

Title: TD ( ) Delete
Name: LAMAN, JAMES J.,
Address: 1235 WESTLAKES DRIVE, SUITE 295
City-St-Zip: BERWYN, PA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition
Name: STANLEY, WILLIAM G.,
Address: 1235 WESLAKES DRIVE, SUITE 295
City-St-Zip: BERWYN, PA 19312

Title: SD (X) Change ( ) Addition
Name: LAMAN, JAMES J.,
Address: 1235 WESTLAKES DRIVE, SUITE 295
City-St-Zip: BERWYN, PA 19312

Title: VPD (X) Change ( ) Addition
Name: EATON, DAVID C.,
Address: 1235 WESTLAKES DRIV, SUITE 295
City-St-Zip: BERWYN, PA 19312

Title: TD (X) Change ( ) Addition
Name: LAMAN, JAMES J.,
Address: 1235 WESTLAKES DRIVE, SUITE 295
City-St-Zip: BERWYN, PA 19312

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: WILLIAM G. STANLEY PSD 01/09/2006

Electronic Signature of Signing Officer or Director Date