


2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Jun 12, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P93000065723	
1. Entity Name STANFORD FINANCIAL GROUP COMPANY	

Principal Place of Business 5050 WESTHEIMER HOUSTON, TX 77056 US	Mailing Address 5050 WESTHEIMER HOUSTON, TX 77056 US
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05022006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 74-2709825	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32302
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00  
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD STANFORD, R. ALLEN 5050 WESTHEIMER HOUSTON, TX 77056
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SUAREZ, YOLANDA M 5050 WESTHEIMER HOUSTON, TX
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT DAVIS, JAMES M 5050 WESTHEIMER HOUSTON, TX 77056
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WINGFIELD, LINDA 5050 WESTHEIMER HOUSTON, TX 77056
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U00000567050  
06/12/06-80007-005 150.00

**DO NOT WRITE  
IN THIS SPACE**

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: \_\_\_\_\_ DATE \_\_\_\_\_ DAYTIME PHONE # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR