## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 01, 2006 08:00 Al Secretary of State DOCUMENT # P94000029710 1. Entity Name STEWARDSHIP ESTATE PLANNING, INC. Principal Place of Business Mailing Address 885 SEDALIA ST. 11014 LAKE MINNEOLA SHORES STE. 102 CLERMONT, FL 34711 OCOEE, FL 34761 04272006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 59-3232516 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROGERS, JEFF DO NOT WRITE 11014 LAKE MINNEOLA SHORE ORLANDO, FL 32810 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME ROGERS, JEFF 11014 LAKE MINNESOTA SHORES STREET ADDRESS CLERMONT, FL 34711 CITY-ST-ZIP U00000551505 05/13/06-80105-004 150.00 TITLE MILLER, RAYMOND W NAME STREET ADDRESS 1804 GARFIELD DR CITY-ST-ZIP NORFOLK, VA 23503 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 it 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 of the production of the corporation of the corp

STREET ADDRESS CITY-51-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

NTED NAME OF SIGNING OFFICER OR DIRECTOR