

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000049213

FILED  
Feb 04, 2009  
Secretary of State

Entity Name: STERLING FINANCIAL COMPANY, INC.

## Current Principal Place of Business:

1131 E VINE ST  
KISSIMMEE, FL 34744 US

## New Principal Place of Business:

## Current Mailing Address:

1131 E VINE ST  
KISSIMMEE, FL 34744 US

## New Mailing Address:

FEI Number: 59-3657250      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRELL, MICHAEL W  
10 CAROLINA AVE.  
SAINT CLOUD, FL 34769 US

## Name and Address of New Registered Agent:

HARRELL, SYDNEY S  
10 CAROLINA AVE.  
SAINT CLOUD, FL 34769 US

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: SYDNEY SUE HARRELL

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: WILLIAMS, WALKER  
Address: 1820 KING JAMES ROAD  
City-St-Zip: KISSIMMEE, FL 34744

Title: DVPS ( ) Delete  
Name: HARRELL, MICHAEL W  
Address: 10 CAROLINA AVE.  
City-St-Zip: SAINT CLOUD, FL 34769

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: HARRELL, SYDNEY S  
Address: 10 CAROLINA AVE  
City-St-Zip: ST CLOUD, FL 34769

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: RAMSEY, KARI MAE W  
Address: 3460 PLESEANT HILL RD AS  
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Change (X) Addition  
Name: WHALEY, KEITH EDWIN JR  
Address: 10 CAROLINA AVE  
City-St-Zip: ST CLOUD, FL 34769

I hereby certify that the information supplied with this filing does not qualify 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: SYDNEY SUE HARRELL

DPT

02/04/2009

Electronic Signature of Signing Officer or Director

Date