2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000090971

1. Entity Name
STICK & SHEPARD, INC.

Principal Place of Business	Mailing Address
6031 CORAL RIDGE HOUSTON, TX 77069	6031 CORAL RIDGE HOUSTON, TX 77069

DO NOT WRITE IN THIS SPACE

01032006 No Chg-P CR2E034 (11/05)

4. FEI Number
58-2507049
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEPRELL, SAMUEL L
SUITE 201, ST. MARK'S PLACE
1930 SAN MARCO BLVD.
JACKSONVILLE, FL 32207

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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 reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

000001489238
04/18/06-80007-025 150.00

10.	OFFICERS AND DIRECTORS
TITLE	D
NAME	STICK, CONNIE L
STREET ADDRESS	6031 CORAL RIDGE RD
CITY-ST-ZIP	HOUSTON, TX 77069
TITLE	DVP
NAME	SHEPARD, ROSE M
STREET ADDRESS	18 STRTAIGHT FARM RD.
CITY-ST-ZIP	PHOENIX, MD 21131
TITLE	PD
NAME	STICK, LARRY G
STREET ADDRESS	6031 CORAL RIDGE RD
CITY-ST-ZIP	HOUSTON, TX 77069
TITLE	VPD
NAME	SHEPARD, DONALD
STREET ADDRESS	18 STARLIGHT FARM RD
CITY-ST-ZIP	PHOENIX, MD 21131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: _____ 3/28/06 281-397-0838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #