

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 08:0
Secretary of St

DOCUMENT # 450059 1. Entry Name ARCHITECTS DESIGN GROUP, INC.	
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Principal Place of Business 333 N KNOWLES AVENUE (32789-3809) WINTER PARK, FL 32780 US	Mailing Address P. O. BOX 1210 WINTER PARK, FL 32792 US
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CRZE034 (11/05)

4. FEI Number 59-1543158	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BECHTEL, STEVEN R.
100 E. ROBINSON ST.
ORLANDO, FL 32801

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 re-registering) DATE _____

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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD REEVES, I S K V 255 SYLVAN BLVD. WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD REEVES, SARA W. 255 SYLVAN BLVD. WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAWSON, TERRY L 333 N KNOWLES AVE WINER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RATIGAN, KEVIN J 333 N KNOWLES AVE WINER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V REEVES, IAN A 333 N KNOWLES AVE. WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/21/06-80001-010 158.75

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: *Terry L. Dawson* **4/4/06** **407-647-1706**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

SIGNATURE: *Raymond Viemboldt* **4-4-06** **386-574-0771**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #