

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003633

Entity Name: HLM ARCHITECTS, INC.

FILED  
Apr 13, 2009  
Secretary of State

## Current Principal Place of Business:

13800 MONTFORT DR., STE 310  
DALLAS, TX 75240

## New Principal Place of Business:

14881 QUORUM DRIVE  
SUITE 600  
DALLAS, TX 75254

## Current Mailing Address:

13800 MONTFORT DR., STE 310  
DALLAS, TX 75240

## New Mailing Address:

14881 QUORUM DRIVE  
SUITE 600  
DALLAS, TX 75254

FEI Number: 75-2377361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: LAMKIN, ROBERT W  
Address: 13800 MONTFORT DR., STE 310  
City-St-Zip: DALLAS, TX 75240

Title: DV ( ) Delete  
Name: HENSLEY, DAVID W  
Address: 13800 MONTFORT DR., STE 310  
City-St-Zip: DALLAS, TX 75240

Title: DV ( ) Delete  
Name: RACHEL, BRUCE W  
Address: 13800 MONTFORT DR., STE 310  
City-St-Zip: DALLAS, TX 75240

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: LAMKIN, ROBERT W  
Address: 14881 QUORUM DR., STE 600  
City-St-Zip: DALLAS, TX 75254

Title: DV (X) Change ( ) Addition  
Name: HENSLEY, DAVID W  
Address: 14881 QUORUM DR., STE 600  
City-St-Zip: DALLAS, TX 75254

Title: DV (X) Change ( ) Addition  
Name: RACHEL, BRUCE W  
Address: 14881 QUORUM DR., STE 600  
City-St-Zip: DALLAS, TX 75254

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: FELICIA ROLLINS

BM

04/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date