2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001830

Entity Name: QUINN/EVANS ARCHITECTS, INC.

FILED Jul 06, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	of Business:	
	ORTH MAIN S' OR, MI 48104	TREET			
Current Mailing Address:			New Mailing Address	s:	
	ORTH MAIN S' OR, MI 48104	TREET			
FEI Number	: 38-2637715	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
2731 EXE	RVICES, INC. CUTIVE PARK , FL 33331	DR SUITE 4 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	QUINN, MICHA	HMAIN STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BARR, LARRY) Delete HMAIN STREET /II 48104	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	JONES, STEVE	HMAIN STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: STEVEN JONES VP 07/06/2009