

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 26, 2001 08:00 AM**
Secretary of State**DOCUMENT # F94000000818**1. Entity Name
PETITJEAN & KENNEDY ARCHITECTS, INC.

Principal Place of Business	Mailing Address
2100 FIRST AVENUE NORTH	2100 FIRST AVENUE NORTH
SUITE 100	SUITE 500
BIRMINGHAM	BIRMINGHAM
35203	35203
US	AL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

63-1056455

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**O'HARA WAYNE**
3840 HOPKINS STREET**PENSACOLA FL**
32505 US**7. Name and Address of New Registered Agent**

Name

O WAYNEStreet Address (P.O. Box Number is Not Acceptable)
3840 HOPKINS STREETCity
PENSACOLA**FL**Zip Code
32505

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.

SIGNATURE **WAYNE O'HARA****03/26/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	DOWLING DONNA C	
STREET ADDRESS	2100 1ST AVENUE NO., STE 100	
CITY-ST-ZIP	BIRMINGHAM AL 35203	

TITLE	VSTD	<input type="checkbox"/> Delete
NAME	KENNEDY PHILIP M.	
STREET ADDRESS	2100 1ST AVENUE NO., STE 100	
CITY-ST-ZIP	BIRMINGHAM AL 35203	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOWLING DONNA C	
STREET ADDRESS	2100 1ST AVENUE NO., STE 100	
CITY-ST-ZIP	BIRMINGHAM AL 35203	

TITLE	VSTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENNEDY PHILIP M.	
STREET ADDRESS	2100 1ST AVENUE NO., STE 100	
CITY-ST-ZIP	BIRMINGHAM AL 35203	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Philip M. Kennedy

Pres

03/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)