

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K08494

FILED
Jan 30, 2009
Secretary of State**Entity Name:** HUMPHREY ROSAL ARCHITECTS, A.I.A, P.A.**Current Principal Place of Business:**3200 9TH STREET NORTH
SUITE 300
NAPLES, FL 34103**New Principal Place of Business:****Current Mailing Address:**3200 9TH STREET NORTH
SUITE 300
NAPLES, FL 341083**New Mailing Address:****FEI Number:** 65-0020984 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HUMPHREY, DAVID M
97 RIDGE DRIVE
NAPLES, FL 34108 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:** P () Delete
Name: HUMPHREY, DAVID M
Address: 97 RIDGE DRIVE
City-St-Zip: NAPLES, FL 34108**Title:** VP () Delete
Name: ROSAL, RANDOLPH G
Address: 2208 KING ARTHUR CT
City-St-Zip: NAPLES, FL 34112**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: KIM KIRK

Electronic Signature of Signing Officer or Director

MGR.

01/30/2009

Date