## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P11306

(8)

ARCHITECTURE, INC.

## **FILED** Mar 11 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					ille <b>atmar dea</b> rk <b>e</b> ik	EH BIBIT IBBI
1801 ALEXAN RESTON VA	IDER BELL DRIVE. SUITE #840 22091	1801 ALEXANDER B RESTON VA 22091	1801 ALEXANDER BELL DRIVE, SUITE #640 RESTON VA 22091			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
6 Dringing D	lace of Business	1 200 123 000000000000000000000000000000				09/03/1986		
	nace of Business	26. Mailing Address				4. FEI Number		pplied For
Suite, Apt.	# etc	Suite, Apt #, etc.				54-1371604		lot Applicable
22	n, 010.	27				5. Certificate of Status Desired		Additional Regulred
City & Stat	0	City & State				& Floation Compaign Financing		
23		28				6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zip	Country	Zip Country				8. This corporation owes or has paid the c		
24	25 29 30		30			Personal Property Tax due June 30.		□ No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered	Agent	
TH	E PRENTICE-HALL CORPORATION	ON SYSTEM INC.		81	Name			
	D1 HAYS STREET			82	Street Addres	ss (P.O. Box Number is Not Acceptable)	<del></del>	
	ITE 105					oo (i .o. box riambar la riat / loadpiable)		i
TALLAHASSEE FL 32301				83				
				64	City		<b>85</b> Zip	Code
					•	FI	_ I I `	
11. Pursuant office or r agent. La	to the provisions of Sactions 607.05( egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607-1508, Florida St ∈ of Florida. Such change w antions of, Section 607.0505	atutes, the ab as authorized Florida Stat	cove d by ules.	<ul> <li>named corpo the corporatio</li> </ul>	ration submits this statement for the purpose in's board of directors. I hereby accept the ap	of changing i pointment as	its registered s registered
SIGNATURE	Signature, typed or point of name of registered ap-				il signature required			
12.		ID DIRECTORS	13.	Agen	a signature required	ADDITIONS/CHANGES TO OFFICERS AN	D DIBECTO	DC IN 12
TITLE	P	DELETE		TLE		ADDITIONO/OFFARGES TO OF TIGERS AN	Change	Addition
NAME	DRURY, WILLIAM R.		. I	1.2 NAME				
STREET ADDRESS	1947 UPPPER LAKE DRIVE				ADORESS			
CITY-ST-ZIP	RESTON VA		1.4 CI	TY-ST	- ZIP			
TALE		DELETE	2.1 Til				Change	Addition
NAME			2.2 NA	ME			=	
STREET ADDRESS			2.3 \$1	REET #	ADORESS			
CITY-ST-ZIP			2 4 CITY-ST-ZIP		I - ZIP			
TITLE		☐ DELFTE	3 1 TIT	LE			Change	Addition
NAME			32 NA	ME				
STREET ADDRESS			3 3 ST	AEET A	VDDRESS			
CITY-ST-ZIP			3 4. Ct		- 21P			
TITLE		DELETE	41 1/1				Change	Addition
NAME			4. 2 N/					l
STREET ADDRESS			4.3 ST	reet a	ADDRESS			ļ
CITY-ST-ZIP		Paris	4.4 Ci1		- ZIP		<del></del>	
TITLE		DELETE	5.1 TIT				Change	Addition
NAME			5.2 NA					}
STREET ADDRESS					DDDRESS			
CITY-ST-ZIP			54.00	V.ST.	P   الا م			

14. I horeby certify that the information supplied with this filing does not qualify for the exidicated on this annual report or supplied entire and accurate an officer or director of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes, I further certify that the information indicated on this annual report is true and accurate an officer or director of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an altachment an address

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

William R. Drury

DELETE

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

Y-ST-ZIP

☐ Addition