

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30533

**FILED**  
**Apr 20, 2005**  
**Secretary of State**

**Entity Name:** SCHEER TANAKA DENNEHY RILEY ARCHITECTS, INC.

**Current Principal Place of Business:**

3190 K AIRPORT LOOP DR  
COSTA MESA, CA 92626 US

**New Principal Place of Business:**

**Current Mailing Address:**

3190 K AIRPORT LOOP DR  
COSTA MESA, CA 92626 US

**New Mailing Address:**

FEI Number: 95-2948232

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

D.T. YOSHINO ARCHITECTS A1A  
7860 GLADES ROAD  
STE 225  
BOCA RATON, FL 33434 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: PTS ( ) Delete  
Name: SCHEER, PATRICK E.,  
Address: 3190 K AIRPORT LOOP DR  
City-St-Zip: COSTA MESA, CA 92626

Title: V ( ) Delete  
Name: TANAKA, RICHARD  
Address: 3190 K AIRPORT LOOP DR  
City-St-Zip: COSTA MESA, CA 92626

Title: VP ( ) Delete  
Name: RILEY, MICHAEL N  
Address: 18201 MCDURMOTT WEST, #A  
City-St-Zip: IRVINE, CA 92614

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 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: PATRICK E. SCHEER

PTS

04/20/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date