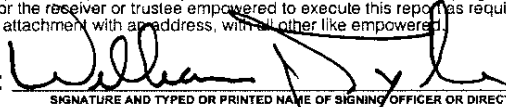


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007 8:00 am
Secretary of State

03-15-2007 90030 021 ***158.75

DOCUMENT # 548679 1. Entity Name BMK ARCHITECTS, INC.					
Principal Place of Business 323 CENTRAL AVE. SARASOTA, FL 34236			Mailing Address 46 N. WASHINGTON BLVD. SUITE 1 SARASOTA, FL 34236		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1754468	
5. Certificate of Status Desired ☒				Applied For Not Applicable	
6. Name and Address of Current Registered Agent LPS CORPORATE SERVICES, INC. 46 N. WASHINGTON BLVD. SUITE 1 SARASOTA, FL 34236				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS TYLE, WILLIAM J 2341 AUBREY LANE SARASOTA, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sarasota FL 34231	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KUYKENDALL, CHARLES E 1130 HAMPTON ROAD SARASOTA, FL 34236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT MCLAIN, DARRELL G 3508 55TH PLACE E BRADENTON, FL 34203	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OPALINSKY, RICHARD 323 CENTRAL AVE SARASOTA, FL 34236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4907 31st St. E. Bradenton FL 34203	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			3/12/07 941.365.6056		
William J. Tyle, Vice President					