## 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003233

Entity Name: TREANOR ARCHITECTS, P.A.

**Current Principal Place of Business:** 

1040 VERMONT STREET LAWRENCE, KS 66044

**Current Mailing Address:** 

1040 VERMONT STREET LAWRENCE, KS 66044 US

FEI Number: 48-1165626 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, ANTHONY JJR. 3530 NW 43RD ST. GAINESVILLE, FL 32606 US

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:

Title

Electronic Signature of Registered Agent

Date

**FILED** Jan 22, 2015

**Secretary of State** 

CC1887028440

Officer/Director Detail:

DIRECTOR

Title COB Title **PRES** 

TREANOR, MICHAEL TREAS Name Name ROWE, DANIEL

1040 VERMONT STREET Address 1040 VERMONT STREET Address

City-State-Zip: TOPEKA KS 66612 LAWRENCE KS 66044 City-State-Zip:

VP/S Title Title VΡ

Name MALIN, STEVE Name ZHIRI, NADIA

Address 1040 VERMONT STREET Address 1040 VERMONT STREET LAWRENCE KS 66044 City-State-Zip: LAWRENCE KS 66044 City-State-Zip:

VΡ Title Title VP, ENGINEERING

Name REYNOLDS, TIMOTHY Name MURPHY, MATTHEW Address 1040 VERMONT STREET 1040 VERMONT STREET Address City-State-Zip: LAWRENCE KS 66044 City-State-Zip: LAWRENCE KS 66044

Title **SECRETARY** 

Name FLEMING, WILLIAM KELLEY, KENNETH V Name

1040 VERMONT STREET Address 1040 VERMONT STREET Address City-State-Zip: LAWRENCE KS 66044 City-State-Zip: LAWRENCE KS 66044

I hereby 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 all other like empowered.

01/22/2015 SIGNATURE: DANIEL ROWE **PRESIDENT**