

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 8:00 am
Secretary of State

01-19-2007 90024 008 ***158.75

DOCUMENT # 452732

1. Entity Name
KENDRICK . DAVID . DOWLING ARCHITECTS, INC.



Principal Place of Business
**111 FERRY ROAD S E
STE A
FORT WALTON BEACH, FL 32548-5535 US**

Mailing Address
**111 FERRY ROAD S E
STE A
FORT WALTON BEACH, FL 32548-5535 US**

50000669



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

59-1536652

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DOWLING, JAMES R
111 FERRY RD SE
FORT WALTON BEACH, FL 32548**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

**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
**SVD
DAVID, DON W JR
721 INDIAN TRAIL
DESTIN, FL 32541** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**SVD
James W. Mattern, Jr.
702 Persimmon Way
Niceville, FL 32578** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**TPD
DOWLING, JAMES R
228 SANTA ROSA ST. SW
FORT WALTON BEACH, FL 32548** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
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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 an other like empowered.

SIGNATURE:

James R. Dowling
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
James R. Dowling

1/16/07

(850) 243-9158

Daytime Phone #