

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000827

Entity Name: CDM ARCHITECTS, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

50 HAMPSHIRE STREET
ATT: LEGAL
CAMBRIDGE, MA 021391548

New Principal Place of Business:

Current Mailing Address:

50 HAMPSHIRE STREET
ATT: LEGAL
CAMBRIDGE, MA 021391548

New Mailing Address:

FEI Number: 04-3437261 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD () Delete
Name: ZELLER, HERBERT G
Address: 50 HAMPSHIRE STREET
City-St-Zip: CAMBRIDGE, MA 02139

Title: TD () Delete
Name: REID, JOHNSTONE N
Address: 835 GROVESMERE LOOP
City-St-Zip: OCOEE, FL 34761 56

Title: D () Delete
Name: MANNING, JOHN D
Address: 50 HAMPSHIRE STREET
City-St-Zip: CAMBRIDGE, MA 02139

Title: DVC () Delete
Name: GALINDO, EDUARDO
Address: 4835 E. CACCTUS RD., SUITE 360
City-St-Zip: PHOENIX, AZ 85354

Title: DS () Delete
Name: LOHMAN, LEE
Address: 6512 NORTH MAPLEWOOD
City-St-Zip: CHICAGO, IL 60645

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GIORGI, BARRY L
Address: 50 HAMPSHIRE STREET
City-St-Zip: CAMBRIDGE, MA 02139

Title: TD (X) Change () Addition
Name: REID, JOHNSTONE N
Address: 2301 MAITLAND CENTER PKWY
City-St-Zip: MAITLAND, FL 34751

Title: D (X) Change () Addition
Name: OMAR, NAJI
Address: 8140 WALNUT HILL LANE, SUITE 1000
City-St-Zip: DALLAS, TX 75231

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

Title: DS (X) Change () Addition
Name: ERIC, DAVIS
Address: 124 W. WACKER DR., SUITE 600
City-St-Zip: CHICAGO, IL 60606

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: BARRY L. GIORGI

PD

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date