

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90032 035 ***150.00

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1. Entity Name
CUNINGHAM GROUP ARCHITECTURE, P.A.



Principal Place of Business
201 MAIN ST SE
SUITE 325
MINNEAPOLIS, MN 55414

Mailing Address
201 MAIN ST SE
SUITE 325
MINNEAPOLIS, MN 55414



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01132004

Chg-P

CR2E034 (10/03)

4. FEI Number

41-1456525

Applied For

Not Applicable

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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 reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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
DCEO
CUNINGHAM, JOHN W
STREET ADDRESS
201 MAIN STREET SE, STE 325
CITY-ST-ZIP
MINNEAPOLIS, MN 55414 ☐ Delete

TITLE
NAME
D
Watts, Jonathan
STREET ADDRESS
4056 Del Rey Avenue
CITY-ST-ZIP
Marina Del Rey, CA 90292 ☐ Change ☒ Addition

TITLE
NAME
DSV
HAMILTON, JOHN E
STREET ADDRESS
201 MAIN STREET SE, STE 325
CITY-ST-ZIP
MINNEAPOLIS, MN 55414 ☐ Delete

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

TITLE
NAME
DPT
QUITER, JOHN E
STREET ADDRESS
4056 DEL REY AVENUE
CITY-ST-ZIP
MARINA DEL REY, CA 90292 ☐ Delete

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

TITLE
NAME
VD
HOSKENS, THOMAS L
STREET ADDRESS
201 MAIN ST SE
CITY-ST-ZIP
MINNEAPOLIS, MN 55414 ☐ Delete

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

TITLE
NAME
D
SCHEIDEL, JAMES
STREET ADDRESS
4056 DEL REY AVENUE
CITY-ST-ZIP
MARINA DEL REY, CA 90292 ☐ Delete

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

TITLE
NAME
VD
LOWE, DOUGLAS A
STREET ADDRESS
4056 DEL REY AVENUE
CITY-ST-ZIP
MARINA DEL REY, CA 90292 ☐ 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 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 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: *John W. Cuningham* JOHN W. CUNINGHAM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/04 612879-3400
Date Daytime Phone #