


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 08:00 AM
Secretary of State

DOCUMENT # F96000001856

1. Entity Name
 WHR ARCHITECTS, INC.



Principal Place of Business 1111 LOUISIANA STREET 26TH FLOOR HOUSTON, TX 77002	Mailing Address 1111 LOUISIANA STREET 26TH FLOOR HOUSTON, TX 77002
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03142007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 76-0127063	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 C/O CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CB WATKINS, DAVID H 1111 LOUISIANA, 26TH FLOOR HOUSTON, TX 77002
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST GAILAND, SMITH 1111 LOUISIANA, 26TH FLOOR HOUSTON, TX 77002
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ROSS, KENNETH L JR, AIA 1111 LOUISIANA STREET - 26TH FLOOR HOUSTON, TX 77002
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WATKINS, DAVID 20 GREENWAY PLAZA, STE 450 HOUSTON, TX 77046
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 04/30/07-80039-013 150.00

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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: Gailand Smith GAILAND SMITH 4-13-07 718-665-5665
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #