## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000002825

Entity Name: KOHN PEDERSEN FOX ASSOCIATES P.C.

FILED Jan 13, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

111 WEST 57TH STREET NEW YORK, NY 10019

Current Mailing Address: New Mailing Address:

111 WEST 57TH STREET NEW YORK, NY 10019

FEI Number: 13-2862504 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: CH

Name: KOHN, EUGENE

Address: 111 WEST 57TH STREET City-St-Zip: NEW YORK, NY 10019

Title: VP

 Name:
 GREENE, MICHAEL

 Address:
 111 WEST 57TH STREET

 City-St-Zip:
 NEW YORK, NY 10019

Title: PRES Name: KATZ, PAUL

Address: 111 WEST 57TH STREET City-St-Zip: NEW YORK, NY 10019

Title: SEC

 Name:
 VON KLEMPERER, JAMES

 Address:
 111 WEST 57TH STREET

 City-St-Zip:
 NEW YORK, NY 10019

Title: VF

Name: PEDERSEN, WILLIAM E Address: 111 WEST 57TH STREET City-St-Zip: NEW YORK, NY 10019

Title: CEO

 Name:
 LOUIE, WILLIAM C

 Address:
 111 WEST 57TH STREET

 City-St-Zip:
 NEW YORK, NY 10019

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.

SIGNATURE: JAMES VON KLEMPERER SEC 01/13/2010