

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001738

Entity Name: IDC ARCHITECTS, PC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

2020 SW 4TH AVENUE 3D FLOOR
PORTLAND, OR 972014958

New Principal Place of Business:

200 CORPORATE CENTER DR.
MOON TOWNSHIP, PA 15108

Current Mailing Address:

9191 S. JAMAICA ST.
ATTN: TAX
ENGLEWOOD, CO 80112

New Mailing Address:

FEI Number: 25-1587283 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: D () Delete
Name: MURRAY, F. JEFFREY
Address: 200 CORPORATE CENTER DR SUITE 200
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: ST () Delete
Name: KING, SUSAN D
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 972014958

Title: DVP () Delete
Name: DINIHANIAN, HARRY
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: D, P () Delete
Name: TIMOTHY, MEIER
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: AVP () Delete
Name: LATHEN, ROBERT L
Address: 9191 S. JAMAICA ST.
City-St-Zip: ENGLEWOOD, CO 80112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: MCKELVY, MICHAEL E
Address: 1500 INTERNATIONAL DR.
City-St-Zip: SPARTANBURG, SC 29303

Title: DAVP (X) Change () Addition
Name: DINIHANIAN, HARRY
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: D/P (X) Change () Addition
Name: TIMOTHY, MEIER G
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

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

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: ROBERT L. LATHEN

AVP

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date