

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**PENDING**  
05-01-2008 90196 045 \*\*\*150.00  
F98000000139

**FILED**

**08 AUG -7 PM 12:21**

**SECRETARY OF STATE**  
**FLORIDA**



1st MOORE CR2E034 (10/07)

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| DOCUMENT # F98000000139                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                          |                                                                                                                                         |                                                                                                                                                                                                                                                                                                        |
| 1. Entity Name<br><b>MILTON PATE &amp; ASSOCIATES, INC.</b><br><b>Milton Pate Architects, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                          |                                                                                                                                         |                                                                                                                                                                                                                                                                                                        |
| Principal Place of Business<br>SUITE 280 DRUID CHASE<br>2801 BUFORD HIGHWAY<br>ATLANTA GA 30329-2104                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                          | Mailing Address<br>SUITE 280 DRUID CHASE<br>2801 BUFORD HIGHWAY<br>ATLANTA GA 30329-2104                                                |                                                                                                                                                                                                                                                                                                        |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                          | 3. Mailing Address                                                                                                                      |                                                                                                                                                                                                                                                                                                        |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                          | Suite, Apt. #, etc.                                                                                                                     |                                                                                                                                                                                                                                                                                                        |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                          | City & State                                                                                                                            |                                                                                                                                                                                                                                                                                                        |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                                                                                                                                  | Zip                                                                                                                                     | Country                                                                                                                                                                                                                                                                                                |
| 4. FEI Number<br><b>58-1079454</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                          | Applied For<br><input type="checkbox"/> Not Applicable                                                                                  |                                                                                                                                                                                                                                                                                                        |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                          | \$8.75 Additional Fee Required                                                                                                          |                                                                                                                                                                                                                                                                                                        |
| 6. Name and Address of Current Registered Agent<br><b>CT CORPORATION SYSTEM<br/>C/O CT CORPORATION SYSTEM<br/>1200 S. PINE ISLAND ROAD<br/>PLANTATION FL 33324</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                          | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> 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 _____ DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                          |                                                                                                                                         |                                                                                                                                                                                                                                                                                                        |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2008 Fee Will Be \$550.00</b><br><b>Make Check Payable to Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                          | 9. Election Campaign Financing<br>Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees                  |                                                                                                                                                                                                                                                                                                        |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                          | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                   |                                                                                                                                                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>PD</b><br><b>PATE, MILTON E SR/AIA</b> <input checked="" type="checkbox"/> Delete<br><b>SUITE 280 DRUID CHASE 2801 BUFORD HIGHWAY</b><br><b>ATLANTA GA 30329-2104</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>Partner/CEO</b><br><b>Pate, Milton E Jr</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>Suite 280 Druid Chase 2801 Buford Highway</b><br><b>Atlanta, GA 30329-2104</b>                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>S</b> <input type="checkbox"/> Delete<br><b>PATE, MILTON E JR</b><br><b>SUITE 280 DRUID CHASE 2801 BUFORD HIGHWAY</b><br><b>ATLANTA GA 30329-2104</b>                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br><b>Partner/Officer</b><br><b>Brown, J. Lockwood</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br><b>Suite 280 Druid Chase, 2801 Buford Highway</b><br><b>Atlanta, GA 30329-2104</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>T</b> <input checked="" type="checkbox"/> Delete<br><b>PATE, MILTON E JR</b><br><b>SUITE 280 DRUID CHASE 2801 BUFORD HIGHWAY</b><br><b>ATLANTA GA 30329-2104</b>      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                      |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                          | 7. 21. 08<br>404 633 4566                                                                                                               |                                                                                                                                                                                                                                                                                                        |

**38 8/7**