

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004476

FILED
Mar 17, 2009
Secretary of State

Entity Name: ROCKWELL ARCHITECTURE, PLANNING AND DESIGN, P.C.

Current Principal Place of Business:

FIVE UNION SQUARE WEST, 7TH FLOOR
ATTN: KIM MACH
NEW YORK, NY 10003

New Principal Place of Business:

5 UNION SQUARE WEST
NEW YORK, NY 10003 US

Current Mailing Address:

5 UNION SQUARE WEST, 7TH FLOOR
ATTN: KIM MACH
NEW YORK, NY 10003

New Mailing Address:

5 UNION SQUARE WEST
NEW YORK, NY 10003 US

FEI Number: 13-3217306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MR. () Delete
Name: ROCKWELL, DAVID S
Address: FIVE UNION SQUARE WEST, 7TH FLOOR
City-St-Zip: NEW YORK, NY 10003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: ROCKWELL, DAVID S
Address: 5 UNION SQUARE WEST
City-St-Zip: NEW YORK, NY 10003 US

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: DAVID ROCKWELL

MR.

03/17/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date