## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.0

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF

Sandra B. Morthan

Secretary of State DIVISION OF CORPORATI

1997

**DOCUMENT** # H71939 (3)

JOHNSON/PETERSON ARCHITECTS, INC.

Principal Place of Business 313 N. MONROE STREET BUITE ONE TALLAHASSEE FL 32301

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CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

Mailing Address

313 N. MONROE STREET SUITE ONE

TALLAHASSEE FL 32301-7621

2. Princip	2. Principal Place of Business			26. Mailing Address			
21							
Sulte,	Apt. #, etc.			Suite, Apt. #, etc.			
22			[27]				
City &	City & State			City & State			
23			28				
Zip		Country		Zip	Coun		
24	25		29		30		
	9. Name and	Address of Cu	rrent Regist	ered Agent			

PATTERSON, JOHN 46 N. WASHINGTON BLVD SUITE 1 SARASOTA FL 34236

City Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the and
office or registered agent, or both, in the State of Florida. Such change was authorized
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statu e-named corporation submits this statement for the purpose of changing its registered y the corporation's board of directors. I hereby accept the appointment as registered

SIGNATURE				1				
	Signature, typed or printed name of registered agent and title if app	Icable (NO1E	: Registered	ent signature	required when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTO		
TITLE	_PTD	DELETE	11 1111		C.T.D.	Change	Addition	
NAME	JOHNSON, IVAN E. III		1.2 NAN	1	<b>-</b> , ., <b>-</b> ,			
STREET ADDRESS	313 N. MONROE ST., SUITE ONE		1.3 STR	1 ADORESS				
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CIT	SY-ZIP				
TITLE	<del></del>	☐ DELETE	21111		P. S. D.	Change	Addition	
NAME	PETERSON, GUY W.		2.2 NA		1.5.5.			
STREET ADDRESS	1		2.3 STF	1 ADDRESS				
CITY-ST-ZIP	SARASOTA FL	······································	2.4 0	S1 - 71P				
TITLE		☐ DELETE	3.1 1(1			Change	Addition	
NAME			3.2 NA					
STREET ADDRESS			3.3 ST	1 ADDRESS				
CITY-ST-ZIP			3.4. C	\$1-7IP				
TITLE		☐ DELETE	4.1 10			Change	Addition	
NAME	l		4. 2 N	į.				
STREET ADDRESS			4.3 ST	EL ADORESS				

1 ADDRESS

Name

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or B 13 m langed, or on an attachment with an address.

5.2 NA

6.1 103

6.2 NAME

5.3 STELL ADDRESS 5.4 CIN- ST - 7(P

6.3 STIEET ADDRESS

DELETE

DELETE

Change

Addition

Addition

**FILED** 

Apr 29 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Zip Code

Not Applicable \$8.75 Additional

03/11/1996

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Yes No

3. Date Incorporated or Qualified

08/20/1985

59-2550734

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

Street Address (P.O. Box Number is Not Acceptable)

4. FEI Number