

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# H71939

**FILED**  
**Nov 09, 2010**  
**Secretary of State**

**Entity Name:** JOHNSON/PETERSON ARCHITECTS, INC.

**Current Principal Place of Business:**

930 THOMASVILLE ROAD  
SUITE 100  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

930 THOMASVILLE ROAD  
SUITE 100  
TALLAHASSEE, FL 32303

**New Mailing Address:**

**FEI Number:** 59-2550734

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LEVINE, MARK  
245 E VIRGINIA ST  
TALLAHASSEE, FL 32301 US

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

GARRETT, AMANDA N  
1734 FOLKSTONE ROAD  
TALLAHASSEE, FL 32312 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: AMANDA N GARRETT

11/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: JOHNSON, IVAN E III  
Address: 525 E CALL STREET  
City-St-Zip: TALLAHASSEE, FL 32304

Title: S, T  
Name: GARRETT, AMANDA N  
Address: 1734 FOLKSTONE ROAD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP  
Name: LANE, JOHN  
Address: 407 BEARD STREET  
City-St-Zip: TALLAHASSEE, FL 32303

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: AMANDA N GARRETT

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11/09/2010

Electronic Signature of Signing Officer or Director

Date