## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## 1500 FILEDULY 06 1501 100/2000 p8:00 AM 400 Secretary of State 550 PALP WUY06 DOCUMENT # J00186 1. Entity Name DONOVAN DEAN ARCHITECTS, INC. Mailing Address Principal Place of Búsiness .\* CK#1595 740 NORTH MAGNOLIA AVENUE 740 NORTH MAGNOLIA AVENUE... ORLANDO, FLT. 32803 ORLANDO, FL: 32803 --CR2E034 (11/05) 07062006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2638742 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEAN, DONOVAN DO NOT WRITE 740 N. MAGNOLIA AVENUE ORLANDO, FL 328031 IN THIS SPACE 19.24 S 20 AP - 1 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signsture required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 10. OFFICERS AND DIRECTORS TITLE NAME DEAN, DONOVAN STREET ADDRESS 740 N.MAGNOLIA AVE. CITY-ST-ZIP ORLANDO, FL 32803 TITLE U00000568850 07/11/06-90001-015 550.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP nne en expercer वर्षकर्यः । सर्वे । तार्यस्यविषयः वृत्तवकः राज्यस्य । सर्वे । तार्यस्यविषयः वृत्तवकः STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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.