

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J67235

FILED
Apr 16, 2008
Secretary of State

Entity Name: STROLLO ARCHITECTS, INCORPORATED

Current Principal Place of Business:

STROLLO ARCHITECTS, INC.
731 FRANKLIN LANE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

731 FRANKLIN LANE
ORLANDO, FL 32801

New Mailing Address:

STROLLO ARCHITECTS, INC.
731 FRANKLIN LANE
ORLANDO, FL 32801

FEI Number: 59-2791402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STROLLO, JAMES P
731 FRANKLIN LANE
ORLANDO, FL 32801 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: JAMES, STROLLO P
Address: 777 FRENCH AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: MRS. () Delete
Name: STROLLO, CYNTHIA A
Address: 777 FRENCH AVENUE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: J. PAT STROLLO

MR.

04/16/2008

Electronic Signature of Signing Officer or Director

_____ Date