2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K00761

FILED Feb 11, 2004 Secretary of State

Entity Name: LUNZ PREBOR FOWLER ARCHITECTS INC

Current Principal Place of Business:		New Principal Place of Business:		
	MORTON DRI D, FL 33801	VE		
urrent N	/lailing Addre	ss:	New Mailing Addres	ss:
	MORTON DRI D, FL 33801	VE		
El Number	r: 59-2853955	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	WARD G			
	MORTON DR. D, FL 33801	US		
AKELAN	D, FL 33801	US	ourpose of changing its registere	ed office or registered agent, or both,
AKELAN he above the Stat	D, FL 33801 e named entity e of Florida.	US	ourpose of changing its registere	ed office or registered agent, or both,
AKELAN The above In the Stat	D, FL 33801 e named entity e of Florida. RE:	US		ed office or registered agent, or both, Date
AKELAN The above the Stat SIGNATU	D, FL 33801 e named entity e of Florida. RE: Electro	US submits this statement for the p		
AKELAN The above the Stat SIGNATU SIGNATU	D, FL 33801 e named entity e of Florida. RE: Electro	US submits this statement for the points signature of Registered Age and Trust Fund Contribution ().	ent	
AKELAN The above the Stat SIGNATU Iection Ca	e named entity e of Florida. RE: Electro mpaign Financii	US submits this statement for the property of	ent	Date
he above the Stat IGNATU Lection Ca PFFICER tte: ame: ddress:	e named entity e of Florida. RE: Electro mpaign Financii S AND DIREC PTD (LUNZ, EDWAI 916 WEDGEV LAKELAND, F	US submits this statement for the provinc Signature of Registered Ageing Trust Fund Contribution (). CTORS:) Delete RD G., VOOD LANE L) Delete 0. LEY AVE	ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDWARD G. LUNZ PTD 02/11/2004