

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M89041 (1)

1. Corporation Name
ARTERBURY ARCHITECTS, INC.



Principal Place of Business 401 WHOOPING LOOP 1537 ALTAMONTE SPRINGS FL 32701-3445 US	Mailing Address 401 WHOOPING LOOP 1537 ALTAMONTE SPRINGS FL 32701-3445 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2400 SAND LAKE RD. Suite, Apt. #, etc. 22 City & State 23 LONGWOOD FL Zip Country 24 32779 25 Seminole	2a. Mailing Address 26 2400 SAND LAKE RD. Suite, Apt. #, etc. 27 City & State 28 LONGWOOD, FL Zip Country 29 32779 30 Seminole
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3. Date Incorporated or Qualified 07/11/1988	4. FEI Number 59-2897431	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**ARTERBURY CORNELL
 670 YOUNGSTOWN PARKWAY #280
 ALTAMONTE SPRINGS FL 32714**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

SIGNATURE _____ (NOT Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DV	<input type="checkbox"/> DELETE
NAME	ARTERBURY, CORDELL	
STREET ADDRESS	1612 FINLEY AVE.	
CITY-ST-ZIP	APOPKA FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	ARTERBURY, MAUREEN	
STREET ADDRESS	1612 FINLEY AVE.	
CITY-ST-ZIP	APOPKA FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	ARTERBURY, CORNELL	
STREET ADDRESS	670 YOUNGSTOWN PKWY #280	
CITY-ST-ZIP	ALTAMONTE SPGS FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DV PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	ARTERBURY, CORDELL	
13 STREET ADDRESS	2400 SAND LAKE ROAD	
14 CITY-ST-ZIP	LONGWOOD, FL 32779	
21 TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	ARTERBURY, MAUREEN	
23 STREET ADDRESS	2400 SAND LAKE ROAD	
24 CITY-ST-ZIP	LONGWOOD, FL 32779	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I 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 supplemental 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 Block 13 if changed, or on an attachment with an address.

[Handwritten Signature]

4-14-98 (12) 779-0132

CR2E034 (10/97)