2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # M98000000543

1. Entity Name
CLEMENTS & ASSOCIATES ARCHITECTURE, PLLC

Principal Place of Business	Mailing Address
507 MAIN STREET NORTH LITTLE ROCK, AR 72114	507 MAIN STREET NORTH LITTLE ROCK, AR 72114

DO NOT WRITE IN THIS SPACE

04122005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
71-0927624	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GEORGE F. YOUNG, INC.
C/O MARTIN T. LOTT
299 NINTH STREET NORTH
ST. PETERSBURG, FL 33731-0683

DO NOT WRITE
IN THIS SPACE

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 signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CLEMENTS, GARY W
STREET ADDRESS	507 MAIN ST.
CITY-ST-ZIP	NORTH LITTLE ROCK, AR 72114

U000000331605
04/26/05-80023-012 50.00

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11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _[signature]_   4/21/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #