2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005408

FILED Apr 30, 2009 Secretary of State

Entity Nai	me: METROP	OLITAN DESIGN & CONSUL ⁻	FING FOUNDATION, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1611 JAYDELL CIRCLE #D TALLAHASSEE, FL 32308				2038 LAMBERT LANE TALLAHASSEE, FL 32317	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1611 JAYDELL CIRCLE #D TALLAHASSEE, FL 32308			2038 LAMBERT LANE TALLAHASSEE, FL 32317		
FEI Number:	: 06-1778646	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DONALD, JENNIFER 1611 JAYDELL CIRCLE #D TALLAHASSEE, FL 32308 US			2038 LAMBERT LANE	DONALD, JENNIFER 2038 LAMBERT LANE TALLAHASSEE, FL 32317 US	
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:				04/30/2009	
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () DONALD, GREG 2038 LAMBERT TALLAHASSE, I	LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () JOHNSON, MAF 707 SPRINGSA TALLAHASSEE	X RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COLLINS, KATE 3080 ABERDEE LITHONIA, GA	N WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY DONALD D 04/30/2009