

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90091 035 ***150.00

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1. Entity Name
ARCHITOURS, INC.



Principal Place of Business

4540 SOUTHSIDE BLVD., SUITE 504
JACKSONVILLE, FL 32216

Mailing Address

4540 SOUTHSIDE BLVD., SUITE 504
JACKSONVILLE, FL 32216



02282007 No Chg-P CR2E034 (11/05)

4. FEI Number
36-4509273

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~PERRY, GLYNDA~~
~~2326 SNOWY EGRET DR.~~
~~JACKSONVILLE, FL 32224~~

GLEND A W WANN
4540 SOUTHSIDE BLVD.
SUITE 504
JACKSONVILLE, FL
32216

**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

Glenda W. Wann

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/1/07

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WANN, GLENDA W
STREET ADDRESS 7932 QUAILWOOD DRIVE
CITY-ST-ZIP JACKSONVILLE, FL 32246

TITLE VD
NAME COCANAUGHER, JENNY
STREET ADDRESS 3570 BEAUCLERC ROAD
CITY-ST-ZIP JACKSONVILLE, FL 32223

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

** Glenda W. Wann 3/1/07*