2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108852

3908 LITTLE LANE

JACKSONVILLE, FL 32223

Address:

City-St-Zip:

FILED Apr 29, 2005 Secretary of State

Entity Name: ARCHI DESIGN ASSOCIATES, INC. **Current Principal Place of Business: New Principal Place of Business:** 11277 CLOVERHILL COURT JACKSONVILLE, FL 32257 **Current Mailing Address: New Mailing Address:** 11277 CLOVERHILL COURT JACKSONVILLE, FL 32257 FEI Number: 11-3705854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **GRIGGS LAW FIRM** RESIDENTIAL DESIGN PROFESSIONALS, INC. 225 WATER STREET 10688 SAINT AUGUSTINE **SUITE 2020** SUITE 2 JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32202 US 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. SIGNATURE: PINARES 'TIC' CHILDERS 04/29/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LITTLE, TIMOTHY S Name: Name: 11277 CLOVERHILL COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LITTLE, STEPHANIE C Name: 11277 CLOVERHILL COURT Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: Title: () Delete () Change () Addition LITTLE, MICKEY E Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: TIMOTHY S. LITTLE DP 04/29/2005