2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000108852

FILED Apr 29, 2008 Secretary of State

Entity Name: ARCHI DESIGN ASSOCIATES, INC.	
Current Principal Place of Business:	New Principal Place of Business:
12276 SAN JOSE BOULEVARD SUITE 119	
JACKSONVILLE, FL 32223 US	
Current Mailing Address:	New Mailing Address:
11277 CLOVERHILL COURT JACKSONVILLE, FL 32257 US	2049 ORANGE PICKER ROAD JACKSONVILLE, FL 32223 US
FEI Number: 11-3705854 FEI Number Applied For ()	El Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
JAMES A. NOLAN, PA 4114 HERSCHEL STREET SUITE 105 JACKSONVILLE, FL 32210 US	
The above named entity submits this statement for the purp in the State of Florida.	ose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: DP () Delete	Title: DP (X) Change () Addition

LITTLE, TIMOTHY S LITTLE, TIMOTHY S Name: Name: Address: 11277 CLOVERHILL COURT Address: 2049 ORANGE PICKER ROAD City-St-Zip: JACKSONVILLE, FL 32257 US City-St-Zip: JACKSONVILLE, FL 32223 US

Title: () Delete Title: (X) Change () Addition LITTLE, STEPHANIE C LITTLE. STEPHANIE C Name: Name: Address: 11277 CLOVERHILL COURT Address: 2049 ORANGE PICKER ROAD

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32223 City-St-Zip: City-St-Zip: Title:

Title: () Delete Name: LITTLE, MICKEY E Name: Address: 3908 LITTLE LANE Address: City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip:

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

SIGNATURE: TIMOTHY S. LITTLE DP 04/29/2008

() Change () Addition