2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13688

Entity Name: MORRIS*ARCHITECTS INC.

FILED May 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	IIN STE 300 I, TX 77002				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1001 FANNIN STE 300 HOUSTON, TX 77002					
FEI Number: 76-0199271 FEI Nu		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Current Registered Agent:	Name and Address of New Registered Agent:		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,					
in the State		submits this statement for the pu	rpose of changing its register	ed office of registered agent, of both,	
SIGNATURE:					
	Electro	nic Signature of Registered Agen	t	Date	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP/D (CHAMBERS, R 4521 PALMET BELLAIRE, TX	го	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PDCE (HUDSON, CHR 4810 FLOREN BELLAIRE, TX	CE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SHEPPARD, M	SPEEDWAY #502	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GEIGER, WAL	IGTON ST STE 500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KOI, GERALD) Delete GUE PLACE #206 'L 32746	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (ALTERGOTT, 0 4919 LOCH LO HOUSTON, TX	MOND	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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS A. HUDSON PDCE 05/21/2009