2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15410

Entity Name: KKE ARCHITECTS, INC.

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
SUITE 500	AVENUE NOI DLIS, MN 5540					
Current Mailing Address:			New Mailin	New Mailing Address:		
SUITE 500	AVENUE NOI DLIS, MN 5540					
FEI Number:	41-0942700	FEI Number Applied For ()	FEI Number Not Applic	cable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and A	Address of	New Registered Agent:	
1200 S. PIN	DRATION SYS NE ISLAND RO DN, FL 33324	DAD				
The above in the State		submits this statement for the pu	urpose of changing its	s registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	nt		Date	
Election Carr	npaign Financing	Trust Fund Contribution ().				
OFFICERS	AND DIREC	TORS:	ADDITIONS	S/CHANGE	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CEO () HOLLENKAMP, 1625 DELAWAI MENDO HEIGH	RE AVE	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	VPTD () MAYERON, RO 130 NEVADA A' GOLDEN VALLI	VE. S.	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ARIAL, BRIAN \ 1200 YOCUM S PASADENA, CA	TREET	Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () SCOTT, QUIN 5307 KELLOGO EDINA, MN 554		Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BROESDER, D 4729 ALDRICH MINNEAPOLIS,	AVE. S.	Title: Name: Address: City-St-Zip:	LAWAL, MOH 4201 ALDRIC		
Title: Name: Address: City-St-Zip:	PDCO () GERSTER, THO 1410-138TH LA ANDOVER, MN	NE NW	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: THOMAS E GERSTER PRES 01/19/2009