2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22387

FILED May 01, 2010 Secretary of State

Entity Name: BSB DESIGN, INC. ARCHITECTURE AND COMMUNITY PLANNING

Current Principal Place of Business: New Principal Place of Business:

9191 R. G. SKINNER PARKWAY 9191 R. G. SKINNER PARKWAY

SUITE 303 SUITE 503

JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32256 US

Current Mailing Address: New Mailing Address:

6601 WESTOWN PARKWAY SUITE 240

WEST DES MOINES, IA 50266 US

FEI Number: 42-1328469 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:

PATTERSON, DERYL
9191 R. G. SKINNER PARKWAY
SUITE 303
JACKSONVILLE, FL 32256 US

PATTERSON, DERYL
9191 R. G. SKINNER PARKWAY
SUITE 503
JACKSONVILLE, FL 32256 US

PATTERSON, DERYL
9191 R. G. SKINNER PARKWAY
SUITE 503
JACKSONVILLE, FL 32256 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: 05/01/2010

Electronic Signature of Registered Agent 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:

Title: PTD

Name: SHARP, DOUGLAS

Address: 6601 WESTOWN PARKWAY, SUITE 240 City-St-Zip: WEST DES MOINES, IA 50266 US

Title: DVS

Name: BUSTER, DOUGLAS

Address: 3436 N. KENNICOTT, SUITE 100 City-St-Zip: ARLINGTON HEIGHTS, IL 60004 US

Title: DV

Name: PATTERSON, DERYL

Address: 9191 R. G. SKINNER PARKWAY, SUITE 503

City-St-Zip: JACKSONVILLE, FL 32256 US

Title: [

Name: SAFIN, JOE

Address: 3436 N. KENNICOTT, SUITE 100
City-St-Zip: ARLINGTON HEIGHTS, IL 60004 US

Title:

Name: MOORE, LARRY

Address: 6601 WESTOWN PARKWAY, SUITE 240 City-St-Zip: WEST DES MOINES, IA 50266 US

Title: D

Name: SWIFT, DAN

Address: 6601 WESTOWN PARKWAY, SUITE 240 City-St-Zip: WEST DES MOINES, IA 50266 US

I hereby 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 all other like empowered.

SIGNATURE: DOUGLAS SHARP PRES 05/01/2010