

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25381

FILED  
May 05, 2009  
Secretary of State

Entity Name: CALLISON ARCHITECTURE, INC.

## Current Principal Place of Business:

1420 FIFTH AVE., STE 2400  
SEATTLE, WA 98101

## New Principal Place of Business:

## Current Mailing Address:

1420 FIFTH AVE., STE 2400  
SEATTLE, WA 98101

## New Mailing Address:

FEI Number: 91-0952399

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEDS ( ) Delete  
Name: KARST, WILLIAM  
Address: 1420 5TH AVE., SUITE 2400  
City-St-Zip: SEATTLE, WA 981012343

Title: PDT ( ) Delete  
Name: TINDALL, ROBERT  
Address: 1420 5TH AVE, SUITE 2400  
City-St-Zip: SEATTLE, WA 981012343

Title: COOD ( ) Delete  
Name: EPPLE, STEVEN  
Address: 1420 5TH AVE, SUITE 2400  
City-St-Zip: SEATTLE, WA

Title: D ( ) Delete  
Name: BIERLY, JOHN  
Address: 1420 5TH AVE STE 2400  
City-St-Zip: SEATTLE, WA 98101

Title: D (X) Delete  
Name: STAFFORD, PAULA  
Address: 1420 5TH AVE STE 2400  
City-St-Zip: SEATTLE, WA 98101

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change ( ) Addition  
Name: TINDALL, ROBERT  
Address: 1420 5TH AVE., SUITE 2400  
City-St-Zip: SEATTLE, WA 981012343

Title: COOD (X) Change ( ) Addition  
Name: EPPLE, STEVEN  
Address: 1420 5TH AVE, SUITE 2400  
City-St-Zip: SEATTLE, WA 981012343

Title: D (X) Change ( ) Addition  
Name: BIERLY, JOHN  
Address: 1420 5TH AVE, SUITE 2400  
City-St-Zip: SEATTLE, WA

Title: D (X) Change ( ) Addition  
Name: STAFFORD, PAULA  
Address: 1420 5TH AVE STE 2400  
City-St-Zip: SEATTLE, WA 98101

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: STEVEN EPPLE

Electronic Signature of Signing Officer or Director

COOD

05/05/2009

\_\_\_\_\_ Date