# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 30, 2009**
**Secretary of State**

DOCUMENT# P92000009128

**Entity Name:** ARONSON & ASSOCIATES ARCHITECTURE, P.A.

**Current Principal Place of Business:**

4151 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

4801 S. UNIVERSITY DR
SUITE 252
DAVIE, FL 33328

**Current Mailing Address:**

4151 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021

**New Mailing Address:**

4801 S. UNIVERSITY DR
SUITE 252
DAVIE, FL 33328

**FEI Number: 65-0371197** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARONSON, NEAL B
4151 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

ARONSON, NEAL B
4801 S. UNIVERSITY DR
SUITE 252
DAVIE, FL 33328 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: NEAL B ARONSON 04/30/2009
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete
Name: ARONSON, NEAL B
Address: 4151 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition
Name: ARONSON, NEAL B
Address: 4801 S. UNIVERSITY DR - SUITE 252
City-St-Zip: DAVIE, FL 33328

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: NEAL B ARONSON OFF 04/30/2009
Electronic Signature of Signing Officer or Director Date