2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000058405

Entity Name: GRIGGS & PLESSAS ARCHITECTS, INC.

FILED Apr 14, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
448 58TH ST. SARASOTA, FL 342432102			1444 FIRST STREET # B SARASOTA, FL 34236		
Current Mailing Address:			New Mailing Address:		
448 58TH S SARASOTA		32102	# B	ST STREET FA, FL 34236	
FEI Number:	65-0764253	FEI Number Applied For () FEI Nu	mber Not Appli	olicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
PLESSAS, NAN 448 58TH ST. SARASOTA, FL 342432102 US			BALL, CHARLES H ATTORNE 1444 FIRST STREET # B SARASOTA, FL 34236 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: CHARLES H. BALL				04/14/2006	
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P PLESSAS, N 448 58TH S' SARASOTA,		Title: Name: Address: City-St-Zip:	P (X) Change () Addition PLESSAS, NAN 1444 FIRST STREET, # B SARASOTA, FL 34236	
Title: Name: Address: City-St-Zip:	VP GRIGGS, CI 448 58TH S SARASOTA,		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition GRIGGS, CHARLES H 1444 FIRST STREET, # B SARASOTA, FL 34236	
Title: Name: Address: City-St-Zip:	NA NA, NA NA NA, NA NA	() Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NA NA, NA NA NA, NA NA	() Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NA NA, NA NA NA, NA NA	() Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NA NA, NA NA NA, NA NA	() Delete	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES H. BALL RA 04/14/2006