

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P99000096848

**Entity Name:** DOUGLAS ROOT ARCHITECTS, INC.

**FILED**  
**Jul 15, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

445 E. PALMETTO PARK RD.  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

445 E. PALMETTO PARK RD.  
BOCA RATON, FL 33432

**New Mailing Address:**

**FEI Number:** 65-0960024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OSHEROW, MARK R P.A.  
7900 GLADES RD S-650  
BOCA RATON, FL 33433 US

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

DERREVERE, JON D P.A.  
470 COLUMBIA DRIVE  
BUILDING B  
WEST PALM BEACH, FL 33409 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: JON D DERREVERE, PA

07/15/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MR ( ) Delete  
Name: ROOT, DOUGLAS R  
Address: 445 E. PALMETTO PARK RD.  
City-St-Zip: BOCA RATON, FL 33432

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

Title: P (X) Change ( ) Addition  
Name: ROOT, DOUGLAS R  
Address: 445 E. PALMETTO PARK RD.  
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOUGLAS ROBERT ROOT

P

07/15/2005

Electronic Signature of Signing Officer or Director

Date