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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S32534

(7)

ARCHITECTURAL DESIGNS, INC.

FILED
Apr 30 1997 8:00am
Secretary of State



	of Business	Mailing Address			1				
2112 N 15TH 8	ST. STE 100	2112 N 15TH ST. STE 10	00						
SUITE 100		SUITE 100							
TAMPA FL 3360 US	05	TAMPA FL 33605-3648 US			9 Data Incorne	waled as Osalificat	las Data	-(115	
UO		00			02/19/199	orated or Qualified	3a. Date 05/01		eport
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		00/01	·	oplied For
21		26	 						ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional			· · · · · · · · · · · · · · · · · · ·
22		27	27			Status Desireo	اسا	-	equired
City & State)	City & State			6. Election Cam	paign Financing		\$5.00	May Be
:3		28			Trust Fund C	ontribution			to Fees
Zip	Country	Zιρ	Country			tion has liability for			. 199.032,
4	25	[29]	30		Florida Statu	· · · · · · · · · · · · · · · · · · ·	Yes 🔲 I		
1474	9, Name and Address of	Current Registered Agent	81	Name	10. Name and A	Address of New Re	gistered Age	∍nt	
	GER, KENNETH P.		61	Ivanie					
	N 15TH ST		82	Street Add	ress (P.O. Box Num	ber is Not Acceptat	ole)		
	E 100		83						
TAM	PA FL 33605		63						
			84	City			 _ [8	35 Zip	Code
44' 5'							FL		
office or re	egistered agent, or both, in the	07.0502 and 607.1508, Florida Statu State of Florida, Such change was	authorized by	the corporat	poration submits this tion's board of direc	s statement for the p tors. I hereby accer	ourpose of ch of the appoin	anging it Iment as	ts registered realstered
agent. I an	n familiar with, and accept the	o obligations of, Section 607.0505, F	lorida Statutes			,			3
0.01.17.107									
SIGNATURE ,	5								
	Signature, typed or printed name of registrons			nt signature requi	red when reinstating)	HANGES TO OFFIC	DATE	DECTOR	2C INI 12
12.	OFFICE	RS AND DIRECTORS	13.	nt signature requi		HANGES TO OFFIC	CERS AND DI		
12. TITLE	PCD OFFICER			nt signature requi		HANGES TO OFFIC	CERS AND DI	RECTOR Change	
12. TITLE NAME	PCD KROGER, KENNETH P.	RS AND DIRECTORS	13.	<u>s.</u>		HANGES TO OFFIC	CERS AND DI		
12. TITLE NAME STREET ADDRESS	PCD KROGER, KENNETH P. 2112 N 15TH ST	RS AND DIRECTORS	13. 1.1 THLE 1.2 WAME 1.3 STREET	ADDRESS 2		257-	CERS AND DI		
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD KROGER, KENNETH P. 2112 N 15TH ST TAMPA FL	RS AND DIRECTORS DELETE	13. 1.1 TH LE -1.2 NAME -1.3 STREET -1.4 GITY -61	ADDRESS 2	ADDITIONS/C LBY A. SI HZW 154 AMPA, PL.	257-	CERS AND DI	Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PCD KROGER, KENNETH P. 2112 N 15TH ST TAMPA FL VD	RS AND DIRECTORS	131.1 TITLE -1.2 NAME -1.2 STREET -1.4 GITY -61 -2.1 TITLE	ADDRESS 2	ADDITIONS/C F HBY A. SI HBY A. ISH HMPA, FL.,	33605	CERS AND DI	Change Change	Addition
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