

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# V65372

FILED
May 28, 2009
Secretary of State

Entity Name: ARCHITECTURAL ARTWORKS INCORPORATED

Current Principal Place of Business:

268 WEST NEW ENGLAND AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

268 WEST NEW ENGLAND AVE
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3147844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KALEITA, GARY M.
215 NORTH EOLA DRIVE
ORLANDO, FL 32801 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

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: DESCOMBES, JOAN
Address: 268 WEST NEW ENGLAND AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: VP () Delete
Name: RIPLEY, JAMES W
Address: 234 MEADOW BAY COURT
City-St-Zip: LAKE MARY, FL 32746 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: DESCOMBES, JOAN
Address: 268 WEST NEW ENGLAND AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: D (X) Change () Addition
Name: DESCOMBES, ROLAND J
Address: 268 WEST NEW ENGLAND AVENUE
City-St-Zip: WINTER PARK, FL 32789 US

Title: VP () Change (X) Addition
Name: WILLIAMS, CHARLES F
Address: 268 WEST NEW ENGLAND AVENUE
City-St-Zip: WINTER PARK, FL 32789 US

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: JOAN DESCOMBES

PRES

05/28/2009

Electronic Signature of Signing Officer or Director

Date