

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 826050

FILED
Jan 19, 2009
Secretary of State

Entity Name: KARLSBERGER ARCHITECTURE INC.

Current Principal Place of Business:

99 EAST MAIN ST
COLUMBUS, OH 43215 US

New Principal Place of Business:

Current Mailing Address:

99 EAST MAIN ST
COLUMBUS, OH 43215 US

New Mailing Address:

FEI Number: 31-0822139 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: MOOMAW PLATT, KAREN
Address: 99 E. MAIN STREET
City-St-Zip: COLUMBUS, OH 43215

Title: D () Delete
Name: TYNE, MICHAEL D.,
Address: 99 E. MAIN STREET
City-St-Zip: COLUMBUS, OH 43215

Title: PD () Delete
Name: BARGER, RICHARD AIA,
Address: 99 E. MAIN STREET
City-St-Zip: COLUMBUS, OH 43215

Title: T () Delete
Name: SATIRA, ANTHONY C.,
Address: 99 E. MAIN STREET
City-St-Zip: COLUMBUS, OH 43215

Title: VD () Delete
Name: PLAPPERT, JOHN J
Address: 99 EAST MAIN ST
City-St-Zip: COLUMBUS, OH 43215 US

Title: VD () Delete
Name: PETERS, JANE
Address: 99 EAST MAIN ST
City-St-Zip: COLUMBUS, OH 43215 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: FICKEL, HOWARD D.,
Address: 99 E. MAIN STREET
City-St-Zip: COLUMBUS, OH 43215

Title: VD (X) Change () Addition
Name: GRUNDEY, ROBERT L
Address: 99 EAST MAIN STREET
City-St-Zip: COLUMBUS, O 43215

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KAREN MOOMAW PLATT

S

01/19/2009

Electronic Signature of Signing Officer or Director

_____ Date