

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 25, 2016
Secretary of State
CC6191601407

Entity Name: BARTONPARTNERS ARCHITECTS PLANNERS, INC.

Current Principal Place of Business:

700 E. MAIN STREET
3RD FLOOR
NORRISTOWN, PA 19401

Current Mailing Address:

700 E. MAIN STREET
3RD FLOOR
NORRISTOWN, PA 19401

FEI Number: 23-2624374

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INTERNATIONAL CORPORATE SOLUTIONS, INC.
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name BARTON, THOMAS CIII
Address 700 E. MAIN STREET, 3RD FLOOR
City-State-Zip: NORRISTOWN PA 19401

Title V, S
Name COGAN, ROBERT W
Address 700 E. MAIN STREET, 3RD FLOOR
City-State-Zip: NORRISTOWN PA 19401

Title PRINCIPAL/SHAREHOLDER
Name ADELSBERGER, BRUCE E.
Address 700 E. MAIN STREET
3RD FLOOR
City-State-Zip: NORRISTOWN PA 19401

Title PRINCIPAL/SHAREHOLDER
Name KOENIG, MATTHEW J.
Address 700 E. MAIN STREET
3RD FLOOR
City-State-Zip: NORRISTOWN PA 19401

Title PRINCIPAL/SHAREHOLDER
Name SHAPIRO, SETH A.
Address 700 E. MAIN STREET
3RD FLOOR
City-State-Zip: NORRISTOWN PA 19401

Title PRINCIPAL/SHAREHOLDER
Name WARWICK, WILLIAM R.
Address 700 E. MAIN STREET
3RD FLOOR
City-State-Zip: NORRISTOWN PA 19401

I hereby 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 all other like empowered.

SIGNATURE: THOMAS C BARTON

PRINCIPAL

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date