### 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004421

Entity Name: BARTONPARTNERS ARCHITECTS PLANNERS, INC.

FILED Feb 27, 2014 Secretary of State CC5920537118

## **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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title	P	Title	V, S

Name BARTON, THOMAS CIII Name COGAN, ROBERT W

Address 700 E. MAIN STREET, 3RD FLOOR Address 700 E. MAIN STREET, 3RD FLOOR

City-State-Zip: NORRISTOWN PA 19401 City-State-Zip: NORRISTOWN PA 19401

Title PRINCIPAL/SHAREHOLDER Title PRINCIPAL/SHAREHOLDER

NameADELSBERGER, BRUCE E.NameKOENIG, MATTHEW J.Address700 E. MAIN STREETAddress700 E. MAIN STREET

3RD FLOOR 3RD FLOOR

NORRISTOWN PA 19401 City-State-Zip: NORRISTOWN PA 19401

Title PRINCIPAL/SHAREHOLDER Title PRINCIPAL/SHAREHOLDER
Name SHAPIRO, SETH A. Name WARWICK, WILLIAM R.

Address 700 E. MAIN STREET Address 700 E. MAIN STREET

3RD FLOOR 3RD FLOOR

City-State-Zip: NORRISTOWN PA 19401 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 III

**PRESIDENT** 

02/27/2014