

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001065

FILED
Mar 13, 2009
Secretary of State

Entity Name: PELLI CLARKE PELLI ARCHITECTS, INC.

Current Principal Place of Business:

1056 CHAPEL STREET
NEW HAVEN, CT 06510

New Principal Place of Business:

Current Mailing Address:

1056 CHAPEL STREET
NEW HAVEN, CT 06510

New Mailing Address:

FEI Number: 06-1228461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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: PD () Delete
Name: PELLI, CESAR
Address: 294 LIVINGSTON STREET
City-St-Zip: NEW HAVEN, CT

Title: STD () Delete
Name: CLARKE III, FRED W.
Address: 140 DAVIS STREET
City-St-Zip: HAMDEN, CT

Title: D () Delete
Name: PELLI, RAFAEL
Address: 355 W 21ST STREET
City-St-Zip: NEW YORK, NY 10011

Title: D () Delete
Name: HIRSCH, MITCHELL
Address: 47 FIELD BROOK RD
City-St-Zip: MADISON, CT 06443

Title: D () Delete
Name: SHOEMAKER, MARK
Address: 980 DUNK ROCK RD
City-St-Zip: GUILFORD, CT 06437

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

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: JOHN BROWNING

Electronic Signature of Signing Officer or Director

MGR

03/13/2009

_____ Date