## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000001364

Entity Name: KIRKLAND & ASSOCIATES ARCHITECTS, P.C.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
3264 MEDLOCK BRIDGE SUITE 110 NORCROSS, GA 30092	RD			
Current Mailing Address:		New Mailing Address:		
3264 MEDLOCK BRIDGE SUITE 110 NORCROSS, GA 30092	ERD			
FEI Number: 58-1587135	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
C T CORPORATION SYS 1200 SOUTH PINE ISLAN PLANTATION, FL 33324	ND ROAD			
The above named entity s in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Age		ent	Date	
Election Campaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	

Title: ( ) Delete Title: (X) Change ( ) Addition KIRKLAND, PATRICK R KIRKLAND, PATRICK R Name: Name: 4488 N. SHALLOWFORD RD., SUITE 110 Address: 3264 MEDLOCK BRIDGE ROAD, SUITE 110 Address: City-St-Zip: DUNWOODY, GA 30338 City-St-Zip: NORCROSS, GA 30092 Title: () Delete Title: (X) Change ( ) Addition MORGAN, HARRY H III MORGAN, HARRY H III Name: Name: Address: Address: 4488 N. SHALLOWFORD RD., SUITE 110 3264 MEDLOCK BRIDGE ROAD, SUITE 110 DUNWOODY, GA 30338 NORCROSS, GA 30092 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete (X) Change ( ) Addition Name: KIRKLAND, JAMIE H Name: KIRKLAND, JAMIE H Address: Address:

2461 CRESCENT MOON LANE 3264 MEDLOCK BRIDGE ROAD, SUITE 110

City-St-Zip: SNELLVILLE, GA 30078 City-St-Zip: NORCROSS, GA 30092

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: PATRICK R. KIRKLAND **PRES** 01/14/2009