


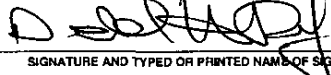
2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90078 025 ****61.25

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DOCUMENT # F02000005032			
1. Entity Name THE INSTITUTE FOR CREATION RESEARCH, INC.			
Principal Place of Business 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071		Mailing Address 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071	
2. Principal Place of Business 10946 WOODSIDE AVE N Suite, Apt. #, etc.		3. Mailing Address 10946 WOODSIDE AVE N Suite, Apt. #, etc.	
City & State SANTEE CA		City & State SANTEE CA	
Zip - 92071 - Country		Zip - 92071 - Country	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
8. 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. I am familiar with, and accept the obligations of registered agent.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		DATE _____	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLISS, RICHARD 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>(please see attached list)</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARRISON, MARK 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MATHER, JAMES 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANDERSON, BARTON 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ARMSTRONG, ROBERT 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EDNEY, DON 10946 WOODSIDE AVENUE NORHT SANREE, CA 92071 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other title empowered.			
SIGNATURE: 		3/16/05 (619) 4480908	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

ATTACHMENT

The Institute for Creation Research Listing of Officers and Trustees

40035422
F02000005032

Officers

Name	Title	Address	City	State	Zip
John Morris	P	10039 Halberns Blvd	Santee	CA	92071
Duane Gish	V	10039 Canyontop St	Spring Valley	CA	91977
Donald Rohrer	T	535 Macon St	El Cajon	CA	92019

Trustees

Name	Title	Address	City	State	Zip
David Wismer	C	10946 Woodside Ave N	Santee	CA	92071
Richard Bliss	T	10946 Woodside Ave N	Santee	CA	92071
Mark Harrison	S	10946 Woodside Ave N	Santee	CA	92071
Robert Armstrong	T	10946 Woodside Ave N	Santee	CA	92071
Jack Brady	T	10946 Woodside Ave N	Santee	CA	92071
Mark Eastman	T	10946 Woodside Ave N	Santee	CA	92071
John Eckersley	T	10946 Woodside Ave N	Santee	CA	92071
Don Edney	T	10946 Woodside Ave N	Santee	CA	92071
Robert Franks	T	10946 Woodside Ave N	Santee	CA	92071
Lee Huntington	T	10946 Woodside Ave N	Santee	CA	92071
Tim LaHaye	T	10946 Woodside Ave N	Santee	CA	92071
James Mather	T	10946 Woodside Ave N	Santee	CA	92071
Richard Owen	T	10946 Woodside Ave N	Santee	CA	92071