2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711866

FILED Jan 14, 2009 Secretary of State

Entity Name: ARABA TEMPLE HOLDING COMPANY, INC.

Current Principal Place of Business: New Principal Place of Business:

2010 HANSON ST. FORT MYERS, FL 33901

Current Mailing Address: New Mailing Address:

2010 HANSON ST. FORT MYERS, FL 33901

FEI Number: 59-1147875 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHAPMAN, CECIL A. FIRMES, JOHN A 13111 LAKE MEADOW DR 1310 SE 44TH TER

FORT MYERS, FL 33913 US CAPE CORAL, FL 33904 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: JOHN A. FIRMES 01/14/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: SD (X) Change () Addition Name: CHAPMAN, CECIL A Name: FIRMES, JOHN A

Address: 13111 LAKE MEADOW DR Address: 1310 SE 44TH TER

City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete Title: D (X) Change () Addition Name: FIRMES, JOHN A Name: SMITH, LARRY J

Address: 1310 SE 44TH TER Address: 137 PLACID DR
City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: FORT MYERS, FL 33919

Title: P () Delete Title: P (X) Change () Addition

 Name:
 STILES, MELVIN
 Name:
 ADAMS, TED G

 Address:
 15451 ALLEN WAY
 Address:
 3384 N KEY DRIVE

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:
 N FORT MYERS, FL 33903

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ADAMS, TED G
 Name:
 COTTON, EDWIN

 Address:
 3384 NORTH KEY DRIVE APT A-7
 Address:
 5622 DEAUVILLE CT

 City-St-Zip:
 NORTH FORT MYERS, FL 33903
 City-St-Zip:
 CAPE CORAL, FL 33904

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A FIRMES SD 01/14/2009