2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756668

FILED Apr 05, 2007 Secretary of State

Entity Name: ARCH CREEK TRUST, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	135TH STREET MAMI, FL 3318				
Current Mailing Address: 1855 NE 135TH STREET NORTH MIAMI, FL 331818901			New Mailing Address	New Mailing Address: 431 NW 146 ST MIAMI, FL 33168	
FEI Number	r: 59-2214211	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address of	f New Registered Agent:	
	46 ST 33168 US	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Age	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	VOYCE, ROSE 14141 N.W. 1 A	VENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COUCH, INEZ 1050 NE 131 S		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	NEILL, BURNH	Т	Title: Name: Address:	() Change () Addition	
Address:	671 NE 71ST S MIAMI, FL 331	38	City-St-Zip:		
Address: City-St-Zip: Title: Name: Address:	MIAMI, FL 331	Delete DL -	City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip:	MIAMI, FL 331 P () HELENE, CARC 431 NW 146 ST MIAMI, FL 331 TD () WERBA, AMY 2374 NE 183 TI	Delete DL 7 68 Delete	Title: Name: Address:	() Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: AMY J WERBA T 04/05/2007