

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005030

Entity Name: THE ARCHIVE GROUP, INC.

FILED
Jan 17, 2005
Secretary of State

Current Principal Place of Business:

1800-112TH AVE., N.E., SUITE 250W
BELLEVIEW, WA 98004

New Principal Place of Business:

1800-112TH AVE., N.E.
SUITE 250W
BELLEVUE, WA 98004

Current Mailing Address:

P.O. BOX 5064
BELLEVUE, WA 980095064

New Mailing Address:

P.O. BOX 5064
BELLEVUE, WA 980095064 US

FEI Number: 91-1609022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DPT () Delete
Name: NOORDA, ROY D
Address: 1800-112TH AVE., N.E., SUITE 250W
City-St-Zip: BELLEVIEW, WA 98004

Title: DVS () Delete
Name: FOLEY, JEANNE M
Address: 1800-112TH AVE., N.E., SUITE 250W
City-St-Zip: BELLEVIEW, WA 98004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: NOORDA, ROY D
Address: 1800-112TH AVE., N.E., SUITE 250W
City-St-Zip: BELLEVUE, WA 98004

Title: DVS (X) Change () Addition
Name: FOLEY, JEANNE M
Address: 1800-112TH AVE., N.E., SUITE 250W
City-St-Zip: BELLEVUE, WA 98004

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROY D. NOORDA

PRES

01/17/2005

Electronic Signature of Signing Officer or Director

Date