2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001404

Entity Name: E. T. ARCHER CORPORATION

FILED Apr 18, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	ROON DRIVE MIT, MO 6406	54				
Current Mailing Address:				New Mailing Address:		
3741 NE TROON DRIVE LEES SUMMIT, MO 64064			8404 INDIAN HILLS DRIVE OMAHA, NE 68114			
FEI Number:	43-1451882	FEI Number Applied For()	FEI Nur	nber Not Appl	Dicable () Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:		Name and	d Address of New Registered Agent:	
1200 SOUT	ORATION SYS FH PINE ISLAN ON, FL 33324	ND ROAD				
The above in the State		submits this statement for the pu	ırpose o	of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ager	nt		Date	
Election Carr	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () CHRISTOPHER 3741 NE TROOL LEES SUMMIT,	N DRIVE		Title: Name: Address: City-St-Zip:	DP (X) Change () Addition LITTLE, GEORGE A 2802 N. 160TH STREET OMAHA, NE 68116	
Title: Name: Address: City-St-Zip:	T () ZIMMERMAN, N 4019 E. DARDE SPRINGFIELD,	NELLE PL.		Title: Name: Address: City-St-Zip:	DEVP (X) Change () Addition BLEEKER, GARY L 1609 S. 193RD STREET OMAHA, NE 68130	
Title: Name: Address: City-St-Zip:	VS () KALIS, MIKE 4601 W. 65TH PRAIRIE VILLAG	Delete GE, KS 66208		Title: Name: Address: City-St-Zip:	D (X) Change () Addition CHRISTOPHER, STANLEY A 410 NW AMBERSHAM DRIVE LEE'S SUMMIT, MO 64081	
Title: Name: Address: City-St-Zip:	() Delete			Title: Name: Address: City-St-Zip:	S () Change (X) Addition PACHMAN, LOUIS J 5008 CHICAGO STREET OMAHA, NE 68132	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	T () Change (X) Addition LACEY, WENDY L 6804 N 106TH CIRCLE OMAHA, NE 68122	

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: WENDY L LACEY T 04/18/2009