

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002294

FILED
Apr 30, 2012
Secretary of State

Entity Name: ARCHER COMMUNITY ACCESS CENTER, INC.

Current Principal Place of Business:

12969 SW 170 ST
ARCHER, FL 32618

New Principal Place of Business:

Current Mailing Address:

12969 SW 170 ST
ARCHER, FL 32618

New Mailing Address:

FEI Number: 59-3714462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHALFANI, CAROLYN Y
7611 S.W. 194 ST.
ARCHER, FL 32618 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

OFFICERS AND DIRECTORS:

Title: P
Name: KHALFANI, CAROLYN Y
Address: 7611 S.W. 194 ST.
City-St-Zip: ARCHER, FL 32618

Title: C
Name: CAUDRON, ARMAND
Address: 17079 SW 138 LN
City-St-Zip: ARCHER, FL 32618

Title: D
Name: FAUCHER, ROGER
Address: 1286 HENDERSON CREEK DR 3
City-St-Zip: NAPLES, FL 34114

Title: D
Name: PIERRE, KENRICK
Address: 9320 N.W. 13TH STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D
Name: KHALFANI, AKIL A
Address: 7611 SW 194TH ST
City-St-Zip: ARCHER, FL 32618

Title: T
Name: HORKY CHAUNCEY, SUSAN
Address: 4724 N.W. 57TH DRIVE
City-St-Zip: GAINESVILLE, FL 32606

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN Y. KHALFANI

PRES

04/30/2012

Electronic Signature of Signing Officer or Director

Date