

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005100

FILED
Sep 07, 2005
Secretary of State

Entity Name: ANCHOR CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

RT 4 BOX 2698
LAKE BUTLER, FL 32054

New Principal Place of Business:

Current Mailing Address:

RT 4 BOX 2698
LAKE BUTLER, FL 32054

New Mailing Address:

7033 S CR 231
LAKE BUTLER, FL 32054

FEI Number: 06-1694503 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JARVIS, ROBERT D
RT 4 BOX 2698
LAKE BUTLER, FL 32054 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: MT () Delete
Name: JARVIS, ROBERT D
Address: RT 4 BOX 2698
City-St-Zip: LAKE BUTLER, FL 32054

Title: MT () Delete
Name: JENKINS, MICHAEL N
Address: RT 4 BOX 2698
City-St-Zip: LAKE BUTLER, FL 32054

Title: MT () Delete
Name: ROBERTS, TONY C
Address: RT 2 BOX 2764
City-St-Zip: LAKE BUTLER, FL 32054

Title: MT () Delete
Name: PRESTON, RONNIE L
Address: 512 SE WALDRON TERR
City-St-Zip: LAKE CITY, FL 32025

Title: MT () Delete
Name: SMITH, BRUCE A
Address: RT 3 BOX 1540-C
City-St-Zip: LAKE BUTLER, FL 32054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: ROBERT D. JARVIS

PRES

09/07/2005

Electronic Signature of Signing Officer or Director

Date